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ABSTRACT

Part of a systematic, in-depth assessment of Miami-Dade Community College's (MDCC's) educational programs, student support systems, and selected campus-level activities, this volume of the college's institutional self-study report examines the impact and effectiveness of the Medical Center Campus. The report contains the results of a campus study based on a modified approach to the traditional standards of the Southern Association of Colleges and Schools (SACS); and an intensive assessment of the Alliance for Employee Advancement System (AEAS), a non-traditional delivery system for health care occupations education. The modified SACS standards study focuses on campus purpose, organization and administration, educational program, financial resources, faculty, library, student development services, physical resources, and special activities (e.g., Nursing Education Community Extension Program, Cuban Nurse Program, post-registered nurse opportunities and Allied Health Technologies Community Extension). Next, an evaluation is provided of the AEAS, including information on the value and quality of the delivery system and the improvements suggested by faculty, hospital executive directors, and hospital education directors. A summary of the studies concludes the report. (HB)

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MIAMI-DADE COMMUNITY COLLEGE

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VOLUME VIII

MEDICAL CENTER CAMPUS STUDIES

84

Self-Study

JC 850 408

VOLUME VIII

MEDICAL CENTER CAMPUS STUDIES

MIAMI-DADE COMMUNITY COLLEGE

1984 INSTITUTIONAL SELF-STUDY

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INTRODUCTION

As its participation in the Miami-Dade 1984 Institutional Self-Study, the Medical Center Campus conducted the two self-evaluation projects reported in this volume. The major study documents results of the evaluation of campus programs and activities in the framework of a modified approach to the Standards of the College Delegate Assembly of the Southern Association of College and Schools (SACS). The second study reports an intensive assessment of the Alliance for Employee Advancement System, a nontraditional delivery system for health care occupations education exemplifying campus educational partnership with the community.

The Medical Center Campus is the only component of the College to conduct a traditional study in 1984 based on the SACS Standards. This approach was elected to meet two major campus needs. First, since the campus had not been defined as a separate administrative unit at the time of the College's previous accreditation self-study in 1974, it was considered beneficial to undertake a comprehensive review and evaluation of its programs and operations, pertinent to the SACS Standards, as part of the campus' participation in the 1984 self-study process. Second, the preponderance of information developed by the present study will also serve the needs of the campus in meeting numerous other accreditation and compliance requirements which it is routinely obligated to satisfy in connection with its health care occupation programs.

The study's modified approach was primarily one of documenting Medical Center Campus compliance with the SACS Standards. Guidelines for the College's overall nontraditional study thus were modified to address only those issues relevant to the campus.

The study's final product is a current status report on the Medical

Center Campus, organized in relation to the nine SACS Standards applicable to community colleges (see Reference 1). It is accompanied by an extensive annotated list of documents which amplify the narrative and support study conclusions, as suggested in the SACS Self-Study Manual (see Reference 2). Copies of these documents, in separate reference files, are available to SACS reviewers and to other readers on request. Suggestions and recommendations for improvement and growth are included at appropriate points in the text and are listed collectively at the end of the report in relation to each Standard.

The process of gathering and reporting data took place over a two-year period, beginning with publication of an in-house self-study manual (see Reference 3) in August 1983, and involved virtually all Medical Center Campus personnel. The Council of Campus Managers functioned as the Steering Committee for this process. All campus areas, organizations, and administrative units were represented on the Council. A list of the Council members is given on page xi.

The Committee to develop the modified self-study had wide representation that included all areas of campus activity. Faculty and staff participated in preparation of material pertinent to the Standard most closely related to their areas of responsibility. For example, Standard Five (Faculty) was prepared by faculty members, and Standard Six (Library) by librarians and audio-visual personnel. In addition, many of the individuals listed participated in review of the entire document. Participants are listed on pages xii-xiii.

Data collection on campus included questionnaire surveys and interviews on relevant topics. When all resulting materials were assembled into a draft document, the campus Steering Committee conducted a thorough review. The draft was also made available to all campus and College groups wishing to evaluate it. A consultant, Dr. Carol L. Zion, was retained to faciliate the review process, providing fresh perspective and a more objective climate for criticism and expression of comments. Following evaluation of content, two editorial reviews were conducted to standardize format and style. Campus and College editors participated in this phase.

This final document is a report on the status of the Miami-Dade Community College Medical Center Campus as of the beginning of the 1985 Winter Term. The projections, suggestions, and recommendations identified in the self-study process will serve to guide the future planning and development of the campus. The suggestions and recommendations compiled at the end of each standard are listed in priority order.

The second report in the volume is the product of the evaluation of a community need-based delivery system for health care occupation education. It was selected for study as representative of the special activities described in Standard Nine and is an on-going Medical Center Campus program. It also exemplifies the commitment of the College and campus to meet community needs.

These needs were reflected in the final report of the Miami-Dade 1974 Institutional Self-Study, which included the recommendation that "...all departments of the College should be encouraged to assess their own areas and disciplines in terms of what they can offer to the community beyond the traditional modes of higher education..." (see Reference 4). Meeting educational needs of the community is also one of the College's twelve fundamental goals (see Reference 5).

In the 1980-81 statement of College goals, as approved by the District Board of Trustees (see Reference 6), the emphasis of the College administration was on its commitment to serve all who could benefit from the College's programs. There was concern that a large segment of Dade County residents was not well served by post-secondary education, and that a substantial proportion of the population required additional education in order to participate fully in society. The plan that was developed emphasized the unique capabilities that each campus of the College had developed to meet the educational needs of Dade County residents. It was important that each campus implement services to assist members of the community in acquiring additional education that would facilitate their success in society. In response to these needs, local hospital administrators assisted the campus in formulating the Alliance for Employee Advancement System. The Campus Advisory Panel supported its implementation.

In assigning responsibility for conducting the Alliance System evaluation, two levels of activity were identified. At the primary level, the committee charged with development and implementation of the study was composed of individuals who had been actively involved in the Alliance delivery system. A listing of the faculty, administrators, and staff representatives on the committee is given on page xiv. At the monitoring and support level of activity, the Council of Campus Managers served as the Steering Committee for the evaluation.

A widely-inclusive approach was used in identifying data sources and target populations for the Alliance study. To obtain the broadest possible base of information, participation included hospital executive directors and education directors, and the Medical Center Campus Alliance System faculty, staff, and students. A separate survey instrument was designed for each population. The many advantages of self-report instruments made this the sampling tool of choice. As the populations were small, the total membership of each group was surveyed. A modified Likert scale, using a range of "strongly agree" to "strongly disagree," defined the responses to each statement. There were provisions for respondents to indicate that the information was not applicable or not known and an opportunity for narrative comment about the Alliance System.

Members of the Alliance System Committee obtained input from other faculty and staff in formulating the survey instruments. A pilot study further modified the design and defined the sample population. For example, former students were eliminated as a study population when the pilot mailing of twenty surveys brought no responses.

Hospital personnel and College staff surveys were distributed by mail. Post-paid return envelopes were included. Results were tabulated and reported in percentages.

Two hundred seventy-two surveys were distributed to five subgroups, with 245 (90%) returned. The majority of responses were of a positive nature, indicating that the Alliance System was achieving its goals and should be continued. Employers responded that their employee attrition rates had been reduced, in some cases resulting in a surplus of qualified personnel. Alliance students expressed approval of courses offered, and of times and places scheduled. Many noted that they would not have continued their education if the Alliance had not been developed. Responses which were less favorable centered on student intake activities. Therefore, one of the recommendations that emerged from the study suggests improved access to information for students.

STUDY PARTICIPANTS

Campus Steering Committee

The Medical Center Campus Council of Campus Managers, listed below, served as the Steering Committee for both the Modified SACS Standards Study and the special campus Alliance For Employee Advancement System study.

Elizabeth J. Lundgren	Vice President, Medical Center Campus Chairperson of the Campus Steering Committee
Mitchell C. Abdallah	Coordinator, Publicity and Community Affairs
Kenneth A. Blye	Dean, Student and Instructional Support Services
Jacqueline K. Claflin	Secretary to the Vice President
Carolea C. Clothier	Registrar
Janie B. Farben	Administrative Assistant to the Dean for Administration
Suzanne S. Hammersberg	Dean, Allied Health Technologies
James E. Hartley	Chairperson, Council of Chairpersons
George T. Hedgespeth	Dean for Administration
Luis Klitin	Director, Educational Technology and Campus Operations
Marta M. Medina	President, Staff Organizational Council
Sylvia A. Murray	Coordinator, Personnel and Budget
Bernardo L. Ortiz	President, Student Senate
Sally A. Ream	Director, Library
Pamela J. Singer	President, Faculty Senate
Carleen M. Spano	Associate Dean, Student and Instructional Support Services
Jeanne A. Stark	Dean, Nursing Education
Patricia M. Stephenson	Director, Instructional Support Services
Peggy L. Wellisch	Campus Director, Financial Aid
Harold J. Zabsky	Administrative Associate to the Vice President

Modified SACS Standards Study Committee

Co-Chairpersons

Suzanne S. Hammersberg

George T. Hedgespeth

Members

Mitchell C. Abdallah	Coordinator, Publicity and Community Affairs
Kenneth A. Blye	Dean, Student and Instructional Support Services
Jeannette R. Brown	Coordinator, Nursing Education Learning Center
Shirley A. Carreiro	Chairperson, Department of Medical Laboratory Technology
Carolea C. Clothier	Registrar
Sherrilyn D. Coffman	Assistant Professor, Nursing Education
Carolyn Cooper	Chairperson, Department of Advisement Services
Henrietta N. Dalke	Chairperson, Department of Transitional Nursing
Janie B. Farben	Administrative Assistant to the Dean for Administration
Ijourie S. Fisher	Chairperson, Department of Dental Hygiene
Jocelyn Y. Gouin	Associate Professor, Radiologic Technology
Simon Growick	Chairperson, Department of Radiologic Technology
Suzanne S. Hammersberg	Dean, Allied Health Technologies
James E. Hartley	Chairperson, Department of Vision Care Technology/Opticianry
George T. Hedgespeth	Dean for Administration
Susan K. Kah	Chairperson, Department of Special Programs in Nursing Education
Rosalind Kahn	Assistant Professor, Nursing Education

Phyllis R. Karson	Library Technician
Susan H. Kass	Administrative Assistant to the Dean of Allied Health Technologies
Luis V. Klitin	Director, Educational Technology and Campus Operations
John F. Lester	Assistant Professor, Emergency Medical Services
Elizabeth J. Lundgren	Vice President, Medical Center Campus
Marcelyn V. Marshall	Secretary, Office of the Vice President
Richard C. Mast	Chairperson, Department of Arts and Sciences (Basic Sciences)
Cora E. Mazzagatti	Administrative Assistant to the Dean of Nursing Education
Marta M. Medina	Staff Associate, Nursing Education
Carol C. Miller	Chairperson, Department of Respiratory Therapy
Sylvia A. Murray	Coordinator, Budget and Personnel
Robert K. Patterson	Chairperson, Department of Physical Therapist Assistant Technology
David Pryor	Chairperson, Department of Emergency Medical Services
Sally A. Ream	Director, Library
Pamela J. Singer	Associate Professor, Nursing Education
Carleen M. Spano	Associate Dean, Student and Instructional Support Services
Jeanne A. Stark	Dean, Nursing Education
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Peggy L. Wellisch	Campus Director, Financial Aid
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William D. Worley	Chairperson, Department of Medical Record Technology
Harold J. Zabsky	Administrative Associate to the Vice President

Alliance for Employee Advancement System Study Committee

Co-Chairpersons

Kenneth A. Blye

Suzanne S. Hammersberg

Members

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Henrietta N. Dalke	Chairperson, Department of Transitional Nursing
Wilbur A. Gilbert	Professor, Arts and Sciences
Suzanne S. Hammersberg	Dean, Allied Health Technologies
Leonor M. Lugo	Instructional Assistant
Marcelyn V. Marshall	Secretary, Office of the Vice President
Richard C. Mast	Chairperson, Department of Arts & Sciences (Basic Sciences)
Margery I. Schwartz	Instructor, Academic Services
Carleen M. Spano	Associate Dean, Student and Instructional Support Services
Patricia M. Stephenson	Director, Instructional Support Services
Willie B. Taylor	Secretary to the Dean, Student and Instructional Support Services

MEDICAL CENTER CAMPUS MODIFIED SACS STANDARDS STUDY

ABSTRACT

As part of its participation in the Miami-Dade 1984 Institutional Self-Study, the Medical Center Campus conducted a comprehensive self-evaluation of its programs and operations, based on the first nine Standards of the Southern Association of Colleges and Schools. Demonstration of compliance with the Standards was modified by adapting College-based requirements to campus concerns.

To assure participation of all segments of the campus community in the study, a committee was formed to gather self-study materials. This process began in 1983 and resulted in a status report for the campus with recommendations for the future.

The central theme that is evident in the report on each Standard is the commitment of the campus to the community. The concerns of students, employees, and members of the health care professions figure prominently in planning and programming. The significance of these concerns is most evident in Standard Nine, where special programs are described.

Suggestions and recommendations that emerged in the self-study process are presented under the Standards to which they relate. Recurring themes are the needs for office and classroom space, expanded library facilities, and upgraded security in the Learning Media Center and the library. Safer student parking is also a major concern.

The acquisition of new facilities is carried over to planning for the future. The report describes those factors, outside the campus and the College, which will influence health care occupational education. State-mandated cost containment measures and changes in Medicare reimbursement policies are most prominent among these factors.

The campus does not plan major changes in its programs or services, but will continue to meet the expanding and changing needs of the community as it has in the past.

HISTORICAL OVERVIEW

During the second year of operation of Miami-Dade Community College, planning for its first health-related program took place. The hiring of a chairperson for the Division of Nursing demonstrated the commitment of the College administration to the education of health care professionals for Dade County. As one of a number of programs being offered in the Technical Studies area, the program was developopded with help from a grant by the W. K. Kellogg Foundation.

As the administrative structure for occupational education evolved into the Division of Technical, Vocational and Semiprofessional Programs, Associate in Science in Nursing degree continued to be the only health occupation curriculum until August 1967. During the previous 18 months a great deal of activity in both the College and the community was directed toward development of other health-related programs. Surveys of the community and health care agencies, in particular, revealed potential need for as many as twenty health occupation programs of study. Further input from the community-wide Medically Related Consortium refined this data and planning committees began the work that would produce ten Associate in Science and one Planned Certificate programs.

The emerging health care curricula made it evident that arrangements would be necessary to house the personnel, classrooms, and laboratories that these new courses would bring to the College. One response to these growing needs was the development of a second nursing program, to be offered at the South Campus. This move also fulfilled the College commitment to bring education closer to the population it serves.

A second and much larger activity was the development of a cooperative arrangement with Mount Sinai Medical Center of Greater Miami. With financial support from a federal grant, Mount Sinai Medical Center completed construction of the Fred Ascher Allied Health Careers Building in 1971, which became an interim location for several of the health-related programs. Other programs continued to be housed at the North and South Campus.

It soon became apparent that these multiple locations were not a fully satisfactory arrangement, and discussions began with the Dade County Board of Public Instruction to acquire 4.3 acres of the west playground of the West Dunbar Elementary School. Its location near several major medical facilities, as well as its central location within the county, made it a potentially advantageous site for the College's health-related programs. Negotiations for acquisition of the land were completed in the late sixties, and construction of the building began in 1975. All health-related programs at the Fred Ascher Building and the North and South campuses were moved to the new facility upon completion of construction in 1977.

Throughout this period, other major events helped to shape the developing campus. The creation of the Division of Medically Related Programs in 1966 established the unit's administrative independence, which was reinforced by the appointment of a full-time director. The transfer of responsibility for teaching from part-time to full-time faculty in the late sixties also provided a more stable academic environment. On July 1, 1974, the programs were designated as the Medical Center Campus, the fourth campus of Miami-Dade Community College, with the appointment of a Campus Vice President.

In the evolution of the campus, some of the original curricula were phased out because of diminished community need, and others were transferred to more appropriate divisions at the North or South Campuses. As plans a the new building became a reality, it was determined that courses from the Arts and Sciences should be part of campus offerings, so that students could complete entire courses of study on the campus.

Relationships with the community continued to strengthen. The two original clinical affiliates, Jackson Memorial and North Shore Hospitals, have now been joined by over 60 other agencies. The input from these affiliates, as well as from program advisory committees, continues to serve as the foundation for campus decision-making.

STANDARD ONE

PURPOSE

1. Campus Purpose

The Medical Center Campus was established in July 1974 by action of the District Board of Trustees. This action followed two years of planning by the Board, which is recorded in the minutes of its meetings (see Reference 1). The purpose of establishing the campus was to centralize the educational programs for nursing and allied health careers offered by Miami-Dade Community College. The focus for programming was identified in the operational philosophy stated in the plans for the campus. This philosophy, describing the purpose of the campus and many of the strategies for its implementation, is as follows:

> Unlike the multipurpose campuses comprising the Community College District, the programming in the Medical Center Campus must be an integral part of agencies external to the College. These agencies represent a component of curriculum which the College could not provide independently. Accordingly, the campus administration will serve as the focus within the College structure for maintaining interrelationships with clinical agencies, other educational institutions, legislative and credentialing activities, and with the multipurpose campuses in planning support programs for the health specialties.
>
> Program design and learning strategies will continue to be accommodative in that performance standards will be high but, at the same time, recognition of life experience and individual needs of the student will be paramount in the operational philosophy.
>
> All programming will continue to be based on reliable, current evidence in terms of the most appropriate programs, locations, and mixes of personnel needed. Sharing of this facility with other institutions, as well as continuing efforts to establish articulated programming within specialties, further illustrates the philosophy of practical service to the student and community (see Reference 2).

These strategies are also utilized in carrying out the missions of the campus program areas. The programs may lead to an Associate in Science degree or a Planned Certificate, or they may consist of a few selected subject area courses, but they all have the mission of preparing health care practitioners.

Within the Arts and Sciences area, the emphasis is also on health career preparation. The courses offered are those required for students to be successful in academic programs or to complete program requirements. This mission extends to support areas, such as the library and audio-visual departments, which are described more completely under subsequent Standards.

The statement of operational philosophy has been widely disseminated and appears in documents such as the 1981 edition of the MCC Advisory Panel Handbook (see Reference 3). As the statement reflects the input of the governing Board, College administration, and faculty, it has their support. The mechanisms by which these and other constituencies review the campus purpose and the program missions are described under Standard Two.

Although significant change in the governance of community colleges is underway in Florida, it does not appear likely that the purpose of the Medical Center Campus will be affected (see Reference 4). Major changes are also affecting the health care industry. It is still too early to assess the total impact on the campus, but if any of the monitoring or advisory systems (see Standard Two, section 3) show need for change, the campus will utilize all of its resources to implement the change.

2. Projections

No substantive changes in the campus purpose are anticipated in the near future.

SUGGESTIONS AND RECOMMENDATIONS FOR STANDARD ONE

None

STANDARD TWO

ORGANIZATION AND ADMINISTRATION

1. Descriptive Titles and Terms

The organizational structure of Miami-Dade Community College and Medical Center Campus reflect the complexities of a large, multi-campus institution. Medical Center Campus is the most recently established of the four campuses that constitute the College. The relationship of the campus to the District Administration is depicted in the College organizational chart in Figure 1.

Formal development of the campus organization took approximately two years, 1975-77 with annual re-definition until 1980. The administrative structure is defined in terms of function and is translated, as accurately as possible, into a traditional organizational chart (Figure 2) and College personnel classifications.

Formal campus communication with the District Board of Trustees is through the College President. Informally, there is one member of the Board assigned annually to each campus and that individual meets with campus administrators as needed. In this way, the individual becomes more knowledgeable about campus complexities and may then serve as an ombudsman, spokesperson, liaison person, or mentor, should the need arise. The Board makes policy decisions, many based on recommendations submitted through administrative channels by the campus. It may review and approve decisions or actions taken at the campus level without interfering with implementation of those policies. Process is clearly an administrative function.

Figure 1

MIAMI-DADE COMMUNITY COLLEGE
TABLE OF ORGANIZATION

DISTRICT ADMINISTRATION

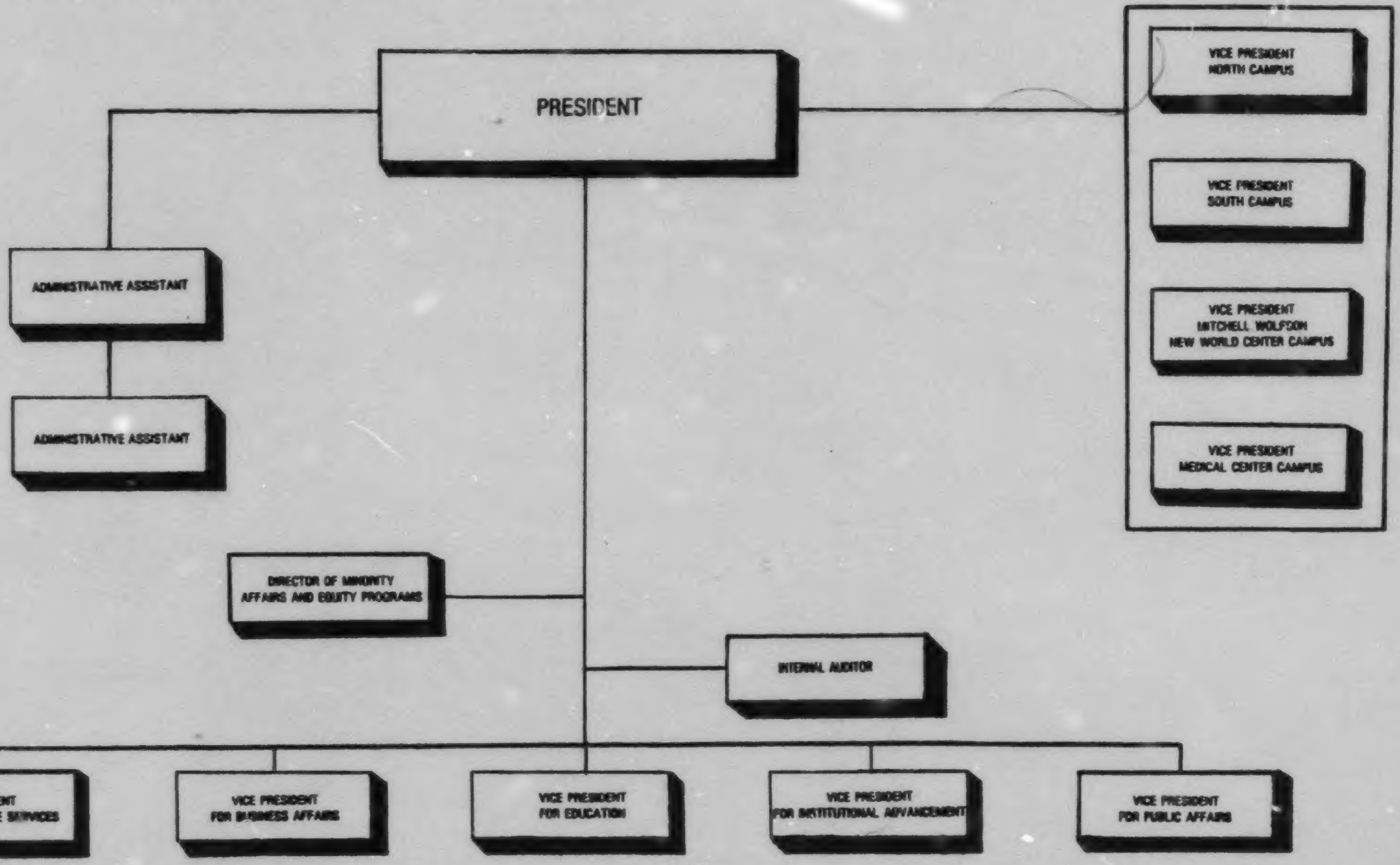
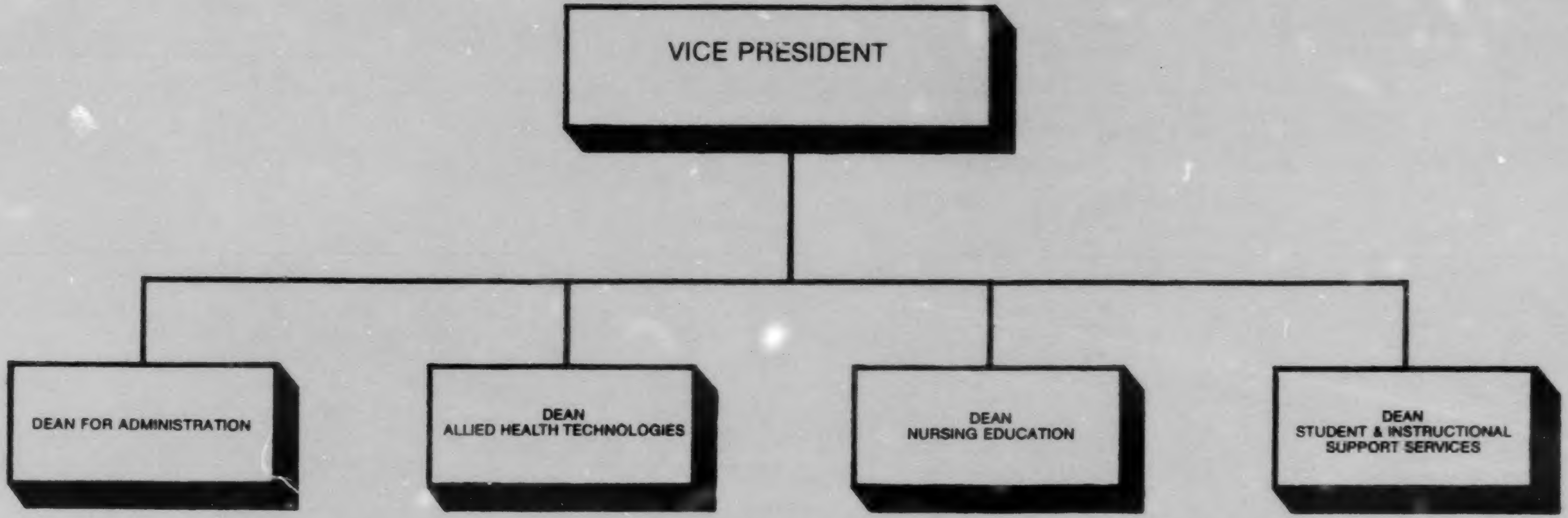

PRESIDENT
ADMINISTRATIVE ASSISTANT
ADMINISTRATIVE ASSISTANT
DIRECTOR OF MINORITY AFFAIRS AND EQUITY PROGRAMS
INTERNAL AUDITOR
VICE PRESIDENT NORTH CAMPUS
VICE PRESIDENT SOUTH CAMPUS
VICE PRESIDENT MITCHELL WOLFSON NEW WORLD CENTER CAMPUS
VICE PRESIDENT MEDICAL CENTER CAMPUS
VICE PRESIDENT FOR ADMINISTRATIVE SERVICES
VICE PRESIDENT FOR BUSINESS AFFAIRS
VICE PRESIDENT FOR EDUCATION
VICE PRESIDENT FOR INSTITUTIONAL ADVANCEMENT
VICE PRESIDENT FOR PUBLIC AFFAIRS

Figure 2

MEDICAL CENTER CAMPUS TABLE OF ORGANIZATION


VICE PRESIDENT
DEAN FOR ADMINISTRATION
DEAN ALLIED HEALTH TECHNOLOGIES
DEAN NURSING EDUCATION
DEAN STUDENT & INSTRUCTIONAL SUPPORT SERVICES

2. Governing Boards

The Medical Center Campus does not have an autonomous, separate governing board.

3. Advisory Committees

A valued resource relevant to program input is provided by the program advisory committees, which meet at least twice annually with faculty and administration. Membership on these committees consists of current students, graduates, and interested community representatives, many of them employees of the health care agencies affiliated with the Medical Center Campus. Members are appointed by the President of the College (see Reference 1).

The roles and functions of the advisory committee members are well defined by the Florida State Department of Education. A film is available to orient new members on their responsibilities, and each individual receives handbooks defining roles and responsibilities (see Reference 2). Minutes of committee meetings are on file at the campus (see Reference 3).

This advisory concept is carried one step further at the Medical Center Campus with a Campus Advisory Panel. The members are chosen for their abilities to meet campus and program needs in a variety of subjects and areas. Among the members are residents of Dade County, other counties in Florida, and other states (see Reference 4). The College President, upon recommendation of the Campus Vice President, appoints members to serve on the Panel whose expertise is important to the campus. This expertise may be in medicine, dentistry, or other health care disciplines but it may also be in law, architecture, or legislation. The Campus Advisory Panel meets at least once a year to review campus plans and to set goals for future activities.

Other resources in the community are available to assist the campus in fulfilling its purpose and in meeting its goals. The South Florida Hospital Association and the Public Health Trust are two such resources that have been available to provide information or support, as requested.

4. Bylaws, Policies and Faculty Manual

Miami-Dade Community College publishes thorough and well-organized records of its policies and procedures. These documents, published as separate policy and procedure manuals, are widely distributed and copies may be found in all campus libraries and administrative offices of the College. Revisions are distributed when policies are updated by the Board of Trustees. This assures that all copies of the manuals are current and accurate (see References 5 and 6).

The Faculty Handbook is described in Standard Five and a copy is included in the reference files for that Standard.

5. Size of Institution

Medical Center Campus enrollment and ethnicity statistics are given in Table 1. This table documents enrollment information for the academic years 1978-79 through 1983-84. There is an increase in the number of students and the number of credits taken. The change in the student population is demonstrated by the marked increase in minority enrollment.

6. The Campus as a Unit

The Medical Center is one of four campuses of Miami-Dade Community College. The relationships between the campus and District administration are described under the relevant Standards. Academic and administration concerns are

Table 1

Medical Center Campus Enrollment And Ethnicity Statistics, 1978-1984

	Academic Year					
	1978-79	1979-80	1980-81	1981-82	1982-83	1983-84
Semester Credits	54,483	57,276	60,395	64,565	70,644	68,328
Unduplicated Headcount (Full- and Part-Time)	3,923	4,009	3,881	4,303	4,877	4,700
White, Non-Hispanic	55.6%	49.2%	48.2%	45.3%	43.4%	41.2%
Black, Non-Hispanic	18.9%	21.8%	24.0%	25.3%	26.4%	24.3%
Hispanic	23.4%	26.0%	25.8%	27.0%	28.3%	32.3%
Other Ethnic Groups	2.1%	3.0%	2.0%	2.4%	1.9%	2.2%

Data Source: Office of Institutional Research. Annual Student Profile Summary Data on Unduplicated Headcount Enrollment. (Research Report Numbers 82-27, 83-38, 84-34).

addressed by collegewide committees. The Medical Center Campus has representation in each of the committees.

7. Administrative Organization

Within the campus structure there are several decision-making groups. The Campus Executive Committee develops the Medical Center Campus philosophy of education, mission statements, goals, and objectives. Membership consists of the Campus Vice President, area deans, the Faculty Senate President, and the Vice President's administrative staff (see Reference 7). This group meets weekly to coordinate total campus activities, allocate resources, and share information.

The Council of Campus Managers is a working group that meets monthly. The members of the Campus Executive Committee are also members of this Council, along with all service area heads, the Chairperson of the Council of Chairpersons, the Student Senate President, and a representative of the Staff Organizational Council (see Reference 8). The Council of Campus Managers is responsible for developing campus policies, reviewing campus plans and operations, and evaluating performance. The charge to this Council is broad and varied. For example, it served as the Steering Committee for conducting this self-study and preparing the written report.

Each academic or service area has an organizational structure defined by the area's needs and function. For example, each dean meets with departmental chairpersons to discuss current issues and problems. The chairpersons are also members of the Campus Council of Chairpersons, which provides them an opportunity to address issues of interest. The structure and membership of each of these groups are found in References 9 and 10.

Those campus organizations in which members are elected by their constituents include the Faculty Senate, Student Senate, and Staff Organizational Council. These groups also select members to represent them on the Council of Campus Managers.

The relationships, delineation of responsibility, and assignment of tasks within administrative areas are defined and described by Medical Center Campus Roles and Responsibilities Guides (MRGs). This administrative system was initiated on Medical Center Campus in 1975 and has evolved through periodic review of the documents.

The MRGs are cooperatively developed by all members of an administrative unit. They identify the unit's functions and assign levels of responsibility for each function to each unit member. As the listing of tasks and the allocation of responsibilities are mutually agreed upon, each member of an administrative unit has participated in defining his or her job. A description of the process and examples of completed MRGs for campus administrative units are found in Reference 11.

While the MRGs define the individual's responsibility within the working group, the College classification system describes positions in a much more traditional format. Campus positions may be placed within the College ranking system, but an individual position description will reflect the Campus needs and functions. For example, the College staffing formula for professional staff provides for three administrative positions at the dean level for each campus. The three positions are divided along lines of responsibility into student, academic, and administrative affairs. However, at Medical Center Campus, there are four deans. The Dean for Student and Instructional Support Services also oversees instructional support functions. These include admissions, registration, financial aid, library, and instruction within the Arts and Sciences disciplines. The academic affairs functions are divided into areas of responsibility according to health occupations. Therefore, the titles Dean of Nursing Education and Dean of Allied Health Technologies are used to describe the academic administrators. The functions of the Dean for Administration parallel those on the other campuses.

Positions for campus support personnel are more likely to follow the College job classifications and descriptions. However, campus size and function may combine or split responsibilities between and among support positions. For example, personnel development, testing, and advisement functions have been redefined to adapt to changing needs.

In general, the level of support personnel is adequate and appropriate. There are occasions, such as the unplanned absence of key personnel, when coverage may be strained. Although support personnel have specific job assignments, there is familiarity with job requirements across areas and help may be recruited from other departments. There are currently no sharing arrangements, such as stenographic pools, although College administration is conducting some exploratory studies for instituting these. It is suggested that a more formal structure be developed to provide a backup for support personnel.

The description and qualifications for all classified staff and administrative positions are in the Classification and Pay Manual (see Reference 5). Other personnel matters such as work expectations and benefits are in the personnel sections of both the Policy Manual and Procedures Manual (see References 5 and 6).

The decision-making processes on Medical Center Campus provide an effective network of information-sharing for all campus personnel. Each individual has at least one avenue into the process and, in most instances, more than one. As all aspects of administration are discussed in these forums, any decisions concerning budget, personnel, space, or other resource allocations involve the individuals most affected by the decisions. There are currently no plans to revise the structure or process.

8. Projections

The campus organization and administration will not be revised in the foreseeable future.

SUGGESTIONS FOR STANDARD TWO

Suggestion One: A more formal structure should be developed to provide backup for support personnel.

RECOMMENDATIONS FOR STANDARD TWO

None

STANDARD THREE

EDUCATIONAL PROGRAM

1. Admission

The Medical Center Campus accepts and enrolls students in a two-stage process. The first stage consists of the process of admission to the College, which follows the policies established by the District Board of Trustees as outlined in the College Catalog (see Reference 1). The campus responsibility for implementing the policy rests with the Campus Registrar. This individual reports to the Campus Dean for Student and Instructional Support Services, who insures accountability for following the guidelines. The collegewide Admissions and Registration Procedures Committee is responsible for dissemination of all admissions policies. The Medical Center Campus Registrar is a voting member of that committee.

After initial determination of the ability and preparation of students, their placement is carefully assessed through the process of individual advisement. Pre-program students, those who have not yet been selected into health occupation programs, are seen by advisors and given guidance in the selection of appropriate courses. Deficiencies are identified by the Basic Skills Assessment Battery required of all applicants. Students who do not demonstrate minimal competencies are advised into appropriate developmental courses.

A prospective student who has not completed junior and senior high school in an English-speaking country is advised to take the English Placement Test (EPT). Medical Center Campus offers the EPT but does not offer a program in English as a second language (ESL). Therefore, students are encouraged to take the test at the campus where they would be enrolling in ESL courses, to assure consistency in their advisement.

When academically prepared, and after having been assisted in realistically appraising their other time demands, students are helped to enroll in appropriate general education and science courses.

The second stage of acceptance of students is selection by individual departments. Prior to program selection, these students are classified in pre-select status. Students must complete an application to the College and be accepted before completing a program application form. These two applications appear in Reference 2.

Program selection criteria are stated in the College Catalog (see Reference 3). The generic criteria developed by campus faculty and administration are based upon academic aptitude and credentials. All successful applicants must be high school graduates or hold the GED, maintain a grade point average of 2.0 or above, and must complete basic skills assessment. Some programs apply more specific criteria, in compliance with state regulations or to meet special program needs. For example, the Associate Degree Nursing (ADN) Transitional Nursing Program accepts only applicants who are licensed practical nurses, respiratory therapy technicians, or other similarly qualified individuals. Exceptions to selection criteria are permitted for applicants who have successfully completed relevant coursework or who have mastered certain job competencies. "Transfer Student Information" may be found in the College Catalog, and "Time-Saving Degree Opportunities" describes credit-by-examination for departmental courses, the College Level Examination Program (CLEP), and the Advanced Placement Program, all of which are options available to Medical Center Campus students (see Reference 4).

The Medical Center Campus reserves the right to deny access to any program to individuals who have been convicted of a felony involving controlled substances or who appear to be unsuited for a health occupation program.

Three Medical Center Campus programs have formalized the advanced placement option by providing access to the Associate Degree for students who have completed accredited programs in other institutions. Nurses who have completed the diploma program at Jackson Memorial Hospital obtain nursing credits by examination. A similar option is available to registered radiologic technologists who have completed an accredited program.

The Medical Record Technology Department has developed a working relationship with the vocational-technical centers and the Community College in Broward County to provide mobility for graduates of the Medical Record Transcription Program. Graduates of this program may challenge four Medical Record Technology lecture courses and participate in three customized practicums. General Education may be taken at Broward Community College and the remainder of Medical Record Technology courses are taught in Broward County by Medical Center Campus faculty. All special program candidates demonstrate their competencies by successful completion of a departmentally administered course and examination.

The program selection policies are implemented by program selection committees. A committee meeting is convened one or more times during the academic year for the purpose of evaluating applicants to a program. As a rule, the committee is chaired by the program chairperson and its membership includes faculty members, representatives of the committee monitoring equal access and equal opportunity provisions, campus advisory personnel, and current program students. College and campus policies regarding non-discrimination are adhered to and selection criteria are applied to all complete application folders. A complete folder contains the program application, all transcripts, results of basic skills assessment, and a completed health form.

Candidates may be ranked for selection if there are more applicants than program space can accommodate. Criteria for ranking include the numbers of credits completed and grade point average achieved.

Students are notified promptly of the status of their applications. Examples of these student notification documents, as well as selection committee activity records, appear in Reference 5. Each department maintains files of its program selection materials.

Students who have been selected are directed to program advisement and registration activities. Candidates who have not been selected have the option of enrolling in general education courses to enhance their ranking for subsequent consideration.

Medical Center Campus faculty and staff strive to maintain open avenues of communication with applicants and other prospective students. In addition to general College information sources, the campus has developed informational materials for distribution to potential students. Campus and program brochures describe health occupations for which students may prepare on the campus. Each department has an information packet, sent to prospective students, describing program eligibility, financial aid, the course of study, and how to apply. Each department sponsors one or more on-campus information sessions each month. The dates and times of these sessions are included in the packets which appear in Reference 6.

Faculty and staff present career information at county fairs, school career days, and on other campuses of the College as well as responding to telephone requests from the community (see References 7-10). This combination of recruitment and career information activities provides potential students with necessary information to make their career choices.

Among the materials that applicants need to make educational program decisions are financial aid brochures. Financial aid policies are clearly expressed and widely published at the campus level. General and specific requirements for financial aid eligibility are based upon federal and state requirements and may be obtained from the College Catalog, financial brochures, or the campus Financial Aid Office.

The campus Financial Aid Office informs chairpersons of scholarship opportunities as they become available. During information sessions, students are also advised to seek out the Financial Aid Office to discuss needs prior to applying to the program. This information, as well as the estimated total cost of the program, is offered to assist prospective students in early planning.

Since the reinstitution of basic skills assessment, there has been marked increase in the number of students in developmental courses. A table of program enrollment appears in Reference 11.

Student achievement has also been influenced by the implementation of the Standards of Academic Progress (SOAP). This program defines collegewide criteria for academic standing and readmission. These guidelines and their influence on enrollment are described in Volume IV, Student Information and Performance Standards, of the 1984 self-study final report.

The campus continues to monitor and evaluate admission and selection criteria, recruitment activities, program enrollments, and student/graduate success as part of its overall service to the community. Each program conducts graduate follow-up surveys. In addition, research on graduates is conducted annually by the College's Office of Institutional Research. The State of Florida conducts a statewide testing program, known as the College Level Academic Skills Test (CLAST), to determine eligibility for junior status in the public university system.

Although the programs offered on Medical Center Campus are primarily for career preparation, students often proceed to upper-division studies. For example, 15% to 20% of Physical Therapist Assistant graduates are presently enrolled in or have graduated from Physical Therapy baccalaureate programs according to departmental records. Approximately twenty graduates from the Respiratory Therapy Technology Program are in or have finished medical school.

Employment in the appropriate career field is another measure of success that is evaluated by graduate follow-up surveys. If there are not adequate opportunities for employment, the program will be subjected to a thorough review by faculty, staff and the advisory committee. Further, the state is developing funding guidelines based upon the employment of graduates of occupational programs.

In summary, the policies for admission, selection, placement, and retention of Medical Center Campus students have been developed and implemented to provide access to those potential students who are most likely to benefit from its educational program and become productive members of the community.

2. Curriculum

At Medical Center Campus, program curricula reflect the institution and campus purpose of providing appropriate occupational preparation. The program curricula are developed to provide the educational experiences necessary for a graduate to become a member of the community's health care delivery system. The behavioral objectives of each course in each program are based on the skills and competencies required for that health care occupation.

The statements of philosophy developed by the faculty are consistent with the goals of Miami-Dade Community College in emphasizing self-development, attainment of knowledge and skills, utilization of creative teaching, life-long learning, and the attainment of the educational goals of the learner.

Each department divides its curriculum into three instructional components. Lecture/discussion courses provide instruction in theory and principles. Laboratory/demonstration permits students hands-on experience with equipment and techniques. The clinical component provides direct patient-related experience under the close supervision of an instructor.

These three instructional components are very effective, as they maximize instructional resources. Each program has laboratory space equipped with state-of-the-art instrumentation. The resources of the community are accessible for clinical experience, as the campus maintains written affiliation agreements with all major health care institutions in Dade County.

Curriculum and instruction are evaluated by faculty, who may receive input for this purpose from student evaluations, peer review, advisory committees, and program accreditation reviewers. All courses are described in the College Catalog, and those descriptions are reviewed biannually for accuracy and appropriateness.

When curriculum additions, deletions, or revisions are indicated, there is a formal process to effect these changes (see Reference 12). The first step in this process takes place on campus by convening the Campus Curriculum Committee. This committee is composed of representatives from the academic areas, chairpersons, the library, the audio-visual department, the Faculty and Student

Senates, and Registration and Advisement (see Reference 13). The requested changes are presented by the program chairperson. Committee members have the opportunity to ask questions concerning the impact of these changes on the areas they represent. When a proposal has been approved by this committee, copies are circulated to the academic deans on the other campuses, who may then seek the responses of their faculty. The proposal is next placed on the agenda of the Academic Affairs Committee, a collegewide committee of academic deans and Faculty Senate representatives. The decision of this committee is the final action for curriculum change. A set of the curriculum approval forms used in this process appears in Reference 14. Included is a form providing for a shortened procedure to initiate a temporary emergency course to meet immediate community needs.

Requests for development of new programs usually come from the health services community, although faculty members may suggest related program ideas. When a suggestion is approved by the campus administration, a meeting is organized to bring together community members and College representatives. A survey instrument is developed for community needs assessment and to evaluate the availability of other programs in the community. If results indicate the need for a program, these same individuals participate in course development. A new program must be approved by the Campus Curriculum Committee, the collegewide Academic Affairs Committee, the District Board of Trustees, and the Regional Coordinating Council (for Planning Region 27). The Regional Coordinating Council (composed of representatives from the College, Dade County Public Schools, and the community) recommends creation, modification, or termination of proposals in vocational education, adult general education, and community instructional programs. This same route of approval is required when a program is discontinued.

Each of the campus curriculum offerings fulfills the purposes of the institution by providing appropriate occupational training and/or by preparing graduates to be informed, responsible citizens. The combined curriculum of developmental and core courses, other offerings in the Arts and Sciences area, and the curriculum of the program discipline accomplish this purpose. The campus purpose assures fulfillment of the College purpose by providing students opportunities to learn theory, practical application, and practice of skills in lecture, laboratory, and clinical formats.

The Medical Center Campus offers all courses required to complete an Associate in Science degree in health occupation programs or an Associate in Arts degree. Within the Arts and Sciences area, courses in developmental reading, writing, mathematics, and the basic sciences are offered, as well as the five core curriculum courses. Most programs culminate in the Associate in Science degree, but there are four Planned Certificate programs. Students may also elect to earn the Associate in Arts degree by completing additional requirements. The campus meets student needs for continuing education through community extension courses, and the Emergency Medical Services Department offers only those courses required to achieve state certification as an Emergency Medical Technician or Paramedic. A list of offerings at the Medical Center Campus follows.

Associate in Science Programs

Dental Hygiene

Dental Technology (Special Program)

Electroencephalographic Technology

Medical Laboratory Tehnology

Medical Record Technology

Nursing (A.D.N. Generic)

Nursing (A.D.N. Transitional)

Nursing (A.D.N. Accelerated Option)

Physical Therapist Assistant Technology

Radiologic Technology

Radiologic Technology (Special Program)

Respiratory Therapy Technology

Vision Care Technology/Opticianry

Planned Certificate Programs

Operating Room Technology

Pharmacy Technician (Special Program)

Respiratory Therapy Technician

Tumor Registry Science

Additional Offerings

Alliance for Employee Advancement

Arts and Sciences

Community Extension

Emergency Medical Services

Post Registered Nurse Opportunities (PRO)

All of the health occupation programs are highly structured, since program content must conform to the essential competencies and skills identified by the faculty and by individual program accrediting agencies. (See Reference 15 for a listing of agencies which accredit each Medical Center Campus program.) As a result, there are almost no elective courses within the required curriculum. The accrediting agencies may also specify minimum hours for a program or for an area of specialization. There are no stated maximum hours. The voluminous individual self-studies for departmental specialized accreditation contain details of the curriculum as well as other relevant program information (see Reference 16).

For each of the campus programs, courses within the curriculum are sequenced in order of increasing complexity. Therefore, courses must be scheduled in sequence and prerequisites must be completed successfully prior to continuation in the program. A student who has failed a program course must wait until the course is offered again before proceeding in the program.

In Nursing Education, there are three routes which lead to the Associate in Science Degree in Nursing: the Generic Nursing, Transitional Nursing, and Accelerated Option programs. Generic Nursing is a two-year program for high school graduates; Transitional Nursing is a one-year program for qualified health practitioners such as Licensed Practical Nurses; and Accelerated Option is for those holding baccalaureate degrees. The development and selection of course materials in all three programs are strongly influenced by the faculty's belief that students should be active participants in their own learning. The nursing content for each has been organized in modules. A module is a written method of systematic instruction using behavioral objectives and related learning activities which assist students to meet course goals.

The curricula for each of the Medical Center Campus programs may be found in Reference 17.

The campus has responded to the need for improved communications skills by assuring that these competencies are stressed in every program. In addition to the developmental and general education courses, all program courses require that students demonstrate their abilities to express themselves verbally and in writing. Students must prepare reports, research related topics in the library, and make presentations in class. Examination formats include essay and short-answer responses instead of the more usual multiple-choice formats. Examinations and reports are graded for form as well as content. It is suggested that additional staffing should be provided for faculty and student support in the collegewide effort to improve reading and writing across the curriculum.

Within Allied Health Technologies, there are three programs for which there is a baccalaureate degree professional level component offered in this community. They are Medical Record Technology (Medical Record Administration), Medical Laboratory Technology (Medical Technologist), and Physical Therapist Assistant Technology (Physical Therapist). By using such strategies as College consortium structures and statewide course numbering systems, the appropriate curriculum for each level has been defined. The Associate Degree program approximates the first two years of study in the Baccalaureate Degree program, and, in principle, Associate Degree graduates should be ready for entry at the junior level in the upper division. This practice is more successful for Medical Record Technicians and Physical Therapist Assistants than for Medical Laboratory Technicians. No Medical Laboratory Technology courses are automatically accepted, but students are eligible for credit by examination in the laboratory portions of each basic content area. All theoretical course work in the field and clinical training must be repeated.

A similar situation exists for graduates of the Associate Degree Nursing Program. Upper-division universities in Florida will accept the students at the junior level but they must pass an examination to receive credit for nursing courses. The course configurations are different and there are many other nursing subjects in the four-year curriculum. The total program after graduating from Miami-Dade Community College is usually more than two years.

Non-program courses from the Arts and Sciences area are readily transferable. Students who declare their intentions to transfer to an upper-division institution are advised also to register for the courses required for the Associate in Arts degree.

3. Instruction

As the campus name indicates, the Medical Center Campus is devoted to the education and training of health care professionals as a community service and in fulfillment of College and Campus goals.

The campus environment is bright, colorful, and clean. The faculty and staff are few in number, permitting a family atmosphere. The common purpose of educating health care professionals unifies the staff and creates a cooperative relationship among the disciplines.

Two programs provide a direct health care service by operating on-campus clinics. The Vision Care Technology/Opticianry and Dental Hygiene Departments offer clinics that provide service to clients and give students an in-house opportunity to work with the public.

The faculty and administration seek advice on instructional policies in a number of ways. The campus as a whole is advised by a group of experts, the

Campus Advisory Panel, in health occupation education and health care delivery. The panel meets annually and is kept informed of campus activities at regular intervals. Each occupational program also has an advisory committee that represents the community in program decision-making. Many of the members of advisory committees are employers of graduates and representatives of clinical affiliates. These committees meet at least twice annually and review current and proposed instructional policies for relevance to the work setting. Composition of the Advisory Panel and committees appears in References 1 and 4 for Standard Two.

Other sources of external support include those extracurricular activities that are made available to the student body. The campus participates in College-sponsored activities such as the Distinguished Visiting Professor Series, the Emphasis on Excellence Program, sponsorship of a Phi Theta Kappa chapter, and a Brain Bowl team.

Extracurricular seminars and lectures may be conducted during the weekly two-hour activity period. Classes are offered during the day, evening, and weekends. Academic schedules and clinical assignments in health care institutions take students away from campus for large blocks of time. The average student in Allied Health Technologies is in his or her late 20s, has family obligations, and does not depend upon the campus for social outlets. Students may participate in functions sponsored by any other campus. Examples of extracurricular activities appear in Reference 18.

The clinical component of each Medical Center Campus program provides another source of support and input to maintain instructional excellence. Each clinical facility participating in the educational program has a written agreement with the College that delineates responsibilities (see Reference 19).

Objectives for the clinical experience are agreed to by faculty and clinic staff. Student clinical activities and evaluation are supervised by College faculty. A table of the more than 60 clinical facilities and the programs for which they provide instruction appears in Reference 20.

Each of the campus departments maintains an active relationship with the appropriate professional associations, accrediting agencies, and those companies supplying books, audio-visual materials, equipment, and supplies. Funds are available for institutional memberships and for faculty to participate in activities sponsored by these agencies. These relationships appear to be adequate for program purposes and have been reviewed by program advisory committees and accreditation reviewers.

The methods of instruction are selected to make the most effective use of the resources of the College and Campus. These methods are based upon objectives, capabilities, and standards of quality. They include lecture, seminar, auto-tutorial, computer-assisted, and individualized courses.

In the beginning nursing courses, students are introduced to new material with structured lecture presentations and laboratory performance after faculty demonstration. As students progress in the program and learn to be more responsible for their own learning, independent research reports and laboratory reports help students to learn organization and improve written and verbal communication skills. The opportunity to practice procedures allows students to become confident in psychomotor skills, as an instructor is always present for support. Audio-visual aids benefit the student by illustrating or reinforcing previously presented subject matter. Films are used to emphasize case studies, introduce new equipment, or demonstrate principles. In more advanced courses and in the clinical practicum, students learn to evaluate procedures and operate more sophisticated equipment. In the latter experience, interpersonal relationships and legal/ethical responsibilities are emphasized.

Experimentation in methods of instruction may include new audio-visual aids, computer technology, and auto-tutorial methods. It may include team teaching or alternate testing mechanisms. Members of the faculty are exposed to new methods in workshops and seminars.

Alternate delivery systems are another form of experimentation that usually develop in response to the needs of a special student population. Examples of alternate delivery systems in the Emergency Medical Technician/Paramedic Program reflect the very special needs of the student population, all of whom are providers of emergency rescue service in Dade County. The standard Paramedic Program is a two-semester offering of 512 contact hours, distributed over 32 weeks of instruction, using traditional class scheduling. An accelerated course was implemented in 1980 in response to a chronic manpower shortage in the Dade County Fire Department. This course meets 40 hours a week for 13 weeks, permitting the department to send employees to class full-time while on duty. The graduates' performance on state licensure examinations parallels that of the more traditional students.

Another modification in delivery is the "C-shift" class, which corresponds to the fire department three-day work cycles. It covers the same curriculum content as the traditional course of 512 hours. Examples of alternate schedules in Emergency Medical Services may be found in Reference 21.

A temporary delivery system is being utilized in the Electroencephalographic (EEG) Technology Program while the program is being evaluated to determine its future with the campus. Low enrollments of two to ten students per class have forced the administration, faculty, and Advisory Committee to study implications of continuation of the program. As a temporary measure, students are pursuing coursework at the Veterans Administration Medical Center, where the Medical Director of the Medical Center Campus program is the Director of Neurological Services. This physician and his staff are extremely supportive of the program and the students are enthusiastic about their educational experiences. There is a continuing need for EEG technologists in the community and there are no other training programs in South Florida. The future of this program is uncertain and rests upon both community and College needs.

Low enrollment in another program has necessitated the development of an alternate delivery system that includes students throughout the State of Florida. Tumor Registry lectures are video-taped for student use in other communities. The American Cancer Society is funding this project because of the need for these professionals in the study of cancer demographics.

In each of the program courses, a syllabus is distributed to all students, listing objectives, course requirements, and methods of evaluation. In developmental courses, small classes provide sufficient student/teacher interaction and reduce the anxiety of students participating in classroom experiences. Independent instructional activities in the Learning Media Center provide students with personalized instruction to assist with specific learning problems. The directed laboratory provides structured experiences to students. It is suggested that additional microcomputers be purchased to permit a higher percentage of students to complete independent instructional activities.

Campus resources are allocated according to program needs, as defined by the faculty and chairpersons. Chairpersons and faculty participate in the design and furnishing of laboratory areas and, in conjunction with students, select the books and other instructional materials to support their courses.

When campus-wide resources are being allocated, the Campus Executive Committee reviews requests to ensure that equitable distributions take place. During this review process, any inadequacies are identified. External to the campus are the program accreditation activities conducted by state and national agencies. The program reviewers evaluate the adequacy of the resources available for these courses of instruction.

As in other instructional resources, budgets are allocated according to departmental needs. Final allocations are reviewed by the Campus Executive Committee. External review of budget adequacy is conducted as part of state and national program accreditations. To the extent possible, the educational programs and all decisions pertaining to them are made in the absence of any financial considerations. The entire budget for each department is allocated to the support of instructional activities. In some instances, this budget may be inadequate or may not be appropriately distributed. For example the current instructional materials security system in the Learning Media Center is not adequate as materials replacement orders have increased steadily over the past two years. Since the cost of replacing the security system is not part of the departmental budget, a separate request for funds in required. In the Learning Media Center, it is recommended that there should be more support for security.

The physical facilities of the campus support the instructional methods by providing space for lecture/demonstration classes, department-designated laboratory space, and individualized learning areas for use of audio-visual materials. Each occupational department has one or more designated laboratories used exclusively by that department. Lecture rooms are shared, which creates scheduling problems as classes are planned each term. For example, the physical facilities used by the Department of Arts and Sciences include classrooms, laboratories, and office space. There are 11 general classrooms on the Medical Center Campus, shared by all programs. The campus is also using four portable classrooms. This is considered inadequate for programs of the size and enrollment found on the campus. There are two natural sciences laboratories, considered inadequate space for departmental needs. It is recommended that additional classrooms, laboratories, and office space be obtained for the Department of Arts and Sciences. The need for more office space is a critical concern for faculty and staff. It is recommended that larger and more secure office space be obtained for all faculty.

The Medical Center Campus library is a specialized Allied Health library, supporting all health care programs taught on this campus as well as Arts and Sciences courses. The book collection contains over 10,000 volumes, 68% of which are health-science related.

There are substantial holdings in medical references, anatomy, physiology, nutrition, pharmacology, psychology, medically-related sciences, and such general medical areas as pediatrics, geriatrics, diseases, surgery, law, diagnosis, and treatment.

The journal collection of 290 current titles has sizable back files for all but the most recent acquisitions. Approximately 87% of the journal titles are health-science related.

The library offers orientation lectures each semester. Most new students attend one of these lectures. All students have access to holdings in the libraries located on each of the other College campuses. Therefore, use of intercampus and interlibrary loans has increased. The campus library is a member of the Miami Health Science Library Consortium. This membership increases the availability of material to Medical Center Campus students. Additionally, hospitals and the University of Miami Medical School cooperate by allowing the students use of their libraries.

The library staff is knowledgeable about health-related subjects. As each program requires research projects and reports, all students make use of these resources.

Faculty make requests for library acquisition of specific books or journals through their chairpersons. In addition, the librarian identifies books which would be an asset to program students and suggests purchases to the chairperson and/or dean. There is no specific library budget assigned to any instructional department. The library has no difficulty in meeting requests with its funding. The process used in the selection of library materials for the Arts and Science Department, as indicated by them, has not been as effective as for the various program discipline departments. It is recommended that the Arts and Sciences Department review the process for requesting the purchase of new books and periodicals with the library.

Instructional assignments to faculty are measured against standards established by the faculty assignment system. Very large or very small class sizes are identified by this system. Those classes in which students demonstrate practical application of skills usually have a lower student ratio than the lecture/discussion classes. The number of laboratory or clinic student stations may dictate class size. All of these factors are evaluated by the chairperson when planning the instruction for the term. They are also reviewed by the dean of the area before final decisions are made.

The campus operates under a formula for assigning teaching and management points. Enrollment projections also predict the number of faculty members required in a given semester. Part-time instructors are employed to teach some of the highly specialized subject matter in health occupation programs as well as to supplement instruction in the Arts and Sciences areas.

The evaluation of instruction relating to course objectives, specific topics, and programs of study is performed by the department chairperson, clinical and campus faculty, and the advisory committees.

In Nursing Education, faculty in each course meet weekly. Faculty responsibilities include assessment of the level of student progress. Meetings of the entire nursing faculty are used to determine the effectiveness of instructional strategies. Decisions for changes in strategies are made by the faculty with input from the Nursing Curriculum Committee.

Students in all Medical Center Campus programs evaluate each course of instruction immediately upon conclusion of the course and may be asked to evaluate the program of instruction in their departments. Individual faculty members may request peer evaluations. The results of these evaluations may be used in the faculty evaluation process and in departmental meetings and meetings with the dean.

Course outlines and objectives are compared with the accrediting agency's curriculum guide, and examination questions are analyzed to determine that they measure stated competencies and objectives. Evaluation of the effectiveness of instruction is an on-going process and is supplemented by outcome evaluations by graduates and employers. Experimental methodologies are subject to the same formal and informal evaluations as the non-experimental formats.

Faculty are formally evaluated once a year. The prime purpose of the evaluation is to promote professional performance and growth, recognize outstanding contributions to the College, and provide a mechanism for faculty to develop and define goals. Outstanding performance by a faculty member can be recognized by granting that person a promotion in academic rank or by placing a letter of commendation in the faculty member's personnel file.

A standardized form is used for the evaluation of faculty members by chairpersons. Chairpersons observe faculty members in the classroom as part of this process. There is also a standardized form for the evaluation of chairpersons by the dean. The departmental and area Medical Center Campus Rules and the Responsibilities Guide assigns responsibilities to appropriate staff members and the evaluation process considers fulfillment of these assignments as well. The Campus Vice President reviews all evaluations with the area dean.

Evaluation of students begins as soon as they apply for admission and are required to take the basic skills assessment. Once they are enrolled, keeping them informed of their progress is a collegewide commitment. Academic Alert, Standards of Academic Progress, and the Advisement and Graduation Information System are three systems used on every campus to meet this commitment. These systems are described and evaluated in detail in Volume IV, Student Information and Performance Standards.

Instructional departments determine methods of evaluating student performance. The methods selected vary with the type of performance being evaluated. Faculty members may develop test items for a course, which are then stored by category in a computerized test bank. They can be withdrawn by subject for incorporation into examinations. This method also facilitates statistical analysis of the items. Examinations are used which require written responses, permitting students to practice writing skills and faculty members to evaluate those skills. Multiple-choice formats are often utilized for final or comprehensive examinations, to simulate the experience of licensure or certifying examinations. Written evaluations of research results, patient treatments, or problem solving are the most appropriate methods to assess those activities.

Observance of clinical and laboratory activities, classroom participation, written reports, and patient interaction are also measurable activities. Each activity is weighted in the evaluation summary to insure that relevant factors are considered. Evaluation assesses competence levels, thus supporting the College concern for quality and clearly identifying students who have not demonstrated minimum career-entry competencies.

In the Learning Media Center, the large number of students served makes testing difficult. It is suggested that more instructional and campus support be obtained to provide effective and secure testing conditions in the Learning Media Center.

Because all program objectives outline how student performance will be evaluated, there is no discrimination in assigning grades to all expected tasks. Examples of evaluation forms appear in Reference 22. All of the health occupation programs require a grade of C or better in each major course. Because of less restrictive enrollment in the Department of Arts and Sciences, the range of these final grades is more reflective of a heterogeneous population than that in the selective admissions programs.

Students completing courses with a number prefix of "000" (e.g., ENC 0006, Writing Development) do not receive traditional letter grades. End-of-term grades assigned in these courses include U (indicating that the student has not made satisfactory progress toward course objectives), P (indicating that satisfactory progress is being made toward achievement of course objectives), or S (indicating that completion of course objectives has been accomplished).

Graduates of all health occupation programs are eligible for various state licensure or national certifying examinations. In some instances, successful completion of an examination is mandatory before a graduate may practice in the profession. In other instances, certification may be voluntary but enhances job placement. When results of these examinations are made available to programs, success rates in various subject areas are used to assess the effectiveness of those courses of instruction. Graduate follow-up is conducted by the Office of Institutional Research (see Reference 23) and by the program. Both graduates and their employers are surveyed in these program evaluations. Examples of survey instruments used by program chairpersons may be found in Reference 24.

Results of graduate and employer questionnaires indicate that they found the Medical Center education programs to be very complete and believed that they prepared graduates for employment situations and certification/licensure examinations.

4. Projections

There are no anticipated changes in the mission or purpose of the College. Therefore, the most significant modifications to policy and procedures that the Medical Center must adopt are those being imposed by outside agencies. For example, the State of Florida has recently mandated that vocational education programs demonstrate a specified level of graduate placement in order to receive state funding. The Medical Center Campus has always conducted graduate surveys, but these now have implications for funding and program continuation.

There are also major changes in the health care industry which create the potential for change in health occupation programs. Cost containment measures have been introduced in all segments of the industry. The most recent, Prospec-

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tive Payment for Medicare Patients, was implemented in October 1983. Its impact cannot be measured as yet. As Medicare recipients will be subject to restrictions of their hospitalization days, there may be diminished need for some health care professionals, and graduates of one- and two-year programs may replace more highly-paid, baccalaureate-trained personnel.

Each of the Medical Center Campus programs maintains individual program accreditation if it provides an advantage to students. The requirements of the accrediting agencies continue to guide chairpersons when major program changes are being considered. The emphasis on outcomes rather than process is a philosophic change taking place both in accrediting agency requirements and program faculty priorities.

The enrollment at Medical Center Campus appears to have stabilized and there are no substantial changes anticipated except for the phasing out of the Operating Room Technology Program. Lack of job opportunities for recent graduates led to this decision.

The increasing significance of computers in program delivery and student evaluation will figure prominently in short- and long-range campus planning. Budget and space allocations as well as curriculum and testing will continue to be influenced by developments in computer technology.

The impending construction of additional campus facilities has given new impetus to planning and has resulted in a thorough evaluation of program status. The availability of new or increased space can only enhance and improve campus services.

SUGGESTIONS FOR STANDARD THREE

Suggestion One: More institutional and campus support should be obtained to provide effective and secure testing conditions in the Campus Learning Media Center.

Suggestion Two: Additional microcomputers should be provided to permit a higher percentage of students to complete independent instructional activities.

Suggestion Three: Additional professional staffing should be provided for faculty/student support in the collegewide effort to improve reading and writing across the curriculum.

RECOMMENDATIONS FOR STANDARD THREE

Recommendation One: Larger and more secure office space should be obtained for all faculty.

Recommendation Two: Additional classrooms, laboratories and office space should be obtained for the Department of Arts and Sciences.

Recommendation Three: There should be more support for security in the Campus Learning Media Center.

Recommendation Four: The Department of Arts and Sciences should review the process for requesting the purchase of new books and periodicals with the library staff.

STANDARD FOUR

FINANCIAL RESOURCES

General

The overall administration of the College's financial resources is a function of the Office of the Vice President for Business Affairs. This function is centralized under a single business officer, who is responsible to the President of the College. This officer has overall responsibility for the management of all College financial resources, including the preparation and control of the College's budget, campus cashiering, accounting services, financial reporting, procurement of supplies and equipment, control of inventories, handling of College income, and the management of auxiliary enterprises. The campus units have limited involvement in these activities.

Since all financial statements and reports are prepared by the District Business Affairs Office rather than by campus units, Standard Four will be modified to reflect only those business functions for which the campus has direct responsibility. Tables and exhibits which usually accompany this Standard are not included. However, they are available in collegewide format through the office of the Vice President for Business Affairs and the Office of Institutional Research.

1. Campus Resources

Except for those funds received from special grants and contracts, the only source of revenue to the campus is an annual allocation from the District administration, used in support of the campus academic programs and its administrative operations. This allocation provides for current expenses, equipment, and part-time and overtime personnel cost. Full-time salaries, fringe benefits, physical plant operation, and other College sources are not campus-budgeted items and remain the responsibility of the College. Campus staffing requirements and position accounting for faculty and administrative personnel are derived through a collegewide formula and are coordinated by the District Vice President for Administration. The campus is responsible for the management and the development of a campus budget from its annual allocation. However, final authority to obligate funds for the campus is retained within the Office of the Vice President for Business Affairs. Reference 1 provides a summary of grants and contracts received by the College. Budgeted expenditures for fiscal years 1982-85 are provided in Reference 2.

2. Organization for the Administration of Campus Resources

The management, preparation, and control of the Medical Center Campus annual budget is the responsibility of the Dean for Administration, who is responsible to the Campus Vice President. The Dean for Administration is one of the principal administrative officers on campus, having overall responsibility for budget planning, contractual coordination, personnel management, monitoring of campus expenditures, retention and reporting of fiscal records, and development and implementation of applicable campus procedures as they relate to the College's Policy Manual and Procedures Manual. Additionally, the Dean for Administration serves on the collegewide Administrative Service Committee, as well as on informal College committees dealing with budgetary affairs. The Dean is also responsible for the audio-visual, campus services, and security areas on campus.

All Medical Center Campus deans have immediate budget responsibility for assuring that operational goals and objectives are fulfilled within the financial resources made available to their areas.

3. Educational and General Expenditures

The College reports total educational and general expenditures, rather than by campus units. It is anticipated that the distribution of budget funding, as well as the campus expenditures, will not vary significantly in the years ahead.

Reference 3 provides an analysis of budgeted full-time salaries for the campus for fiscal years 1974-85. This table shows the number of faculty, administrators, and classified personnel, with the mean salaries for each category for the years indicated.

The College's Cost Analysis Report provides a detailed summary on the full cost of instruction by individual courses (see Reference 4). This analysis takes into account a fixed administrative cost based on the total expenditures of the four campus units and District administration.

4. Campus Budget Planning and Control

The College operates on a fiscal-year cycle from July 1 to June 30. Based on a projection of State funding, student fee collection, government appropriations, and other miscellaneous revenue, the Vice President for Business Affairs notifies the campus each March of its preliminary allocation for the upcoming fiscal year. Upon receiving notification, the Dean for Administration presents to the Campus Executive Committee all pertinent information pertaining to the campus preliminary allocation, including worksheets, guidelines, restrictions, and limitations. The Campus Executive Committee reviews all information and formulates campus priorities and criteria for the preparation of the campus budget. To the extent possible, priorities are determined through a democratic process.

Upon completion of this process, a preliminary allocation is distributed among the respective campus areas for further dissemination to departments. The Dean for Administration consolidates all of the departmental requests and prepares a campus budget for adoption by the Campus Executive Committee. After the budget has been adopted, it is submitted to the Vice President for Business Affairs for inclusion in the collegewide budget. The budget is reviewed by the President and forwarded to the District Board of Trustees for final approval. Notification of the final budget is usually made in June.

The campus budget is prepared so that cost centers are consistent with the campus organizational structure. Each account is delineated with an object code classification which reflects specific fiscal activity within any given cost center. All campus expenditures are charged directly against the cost center which received services. Transfer of funds among departments is made where surpluses or deficits occur. The collegewide system of budget control is described in the Procedures Manual (see Standard Two, Reference 5).

The College's Central Accounting Office provides monthly budget statements to the campus and individual departments. These statements report monthly expenditures, encumberances, and remaining budget allocations. All unexpended campus funds revert to the College administration, where their disposition is determined by the Vice President for Business Affairs.

Sample budget request forms, a chart of accounts, object code classifications, and monthly budget statements are presented as References 5-8.

5. Accounting, Reporting, and Auditing

The College accounting system is centralized within the Office of Central Accounting, under the Vice President for Business Affairs. The receipt of income and the disbursement of funds are channeled through this area. All financial statements for the College as well as those for the individual campuses are prepared through this area. The College financial records are audited annually by the State. Additionally, the College employs a staff of internal auditors, responsible to the President, to continually check and verify accounting records, procedures, and controls, including those of the campus.

The campus itself employs a simple bookkeeping system as an internal mechanism of budget control. The Dean for Administration is responsible for maintaining this system. In addition, the campus employs a procedure whereby each purchase and check requisition is approved by the respective area dean and the Dean for Administration, before being routed to Central Accounting. Personnel requisitions and payroll documents follow a similar routing system.

All student fees and miscellaneous income--e.g., sale of eyewear in the campus Vision Care Clinic, and replacement of identification cards--are collected directly by the Bursar's Office. Receipts from the campus bookstore and vending operations are handled by Auxiliary Services. Both Auxiliary Services and the Bursar are responsible to the Vice President for Business Affairs. Employees working in these areas are not considered part of the Medical Center Campus staff though physically located on the Campus.

6. Purchases and Inventory Control

Final authority to obligate funds for the campus is retained by the Vice

President for Business Affairs. Requests for goods and services are requisitioned by the campus and are processed through the College Purchasing Department. After it has been determined that sufficient funds exist within the budget of the requesting department, requisitions are approved, funds are encumbered, and a purchase order is issued. Purchase invoices are received in Central Accounting and, upon verification from the campus that services were received, payment is made.

All equipment purchased for campus use is considered property of the College. Therefore, the Office of the Vice President for Business Affairs has primary responsibility for its receipt, custody, and control. All capital items are tagged and records kept of their locations by the Property Control Department. Equipment inventory is computerized, with constant updating to maintain accuracy and control. The campus is required to make a periodic inventory of equipment. Guidelines pertaining to inventory control are given in Reference 9.

The College maintains limited warehouse facilities at the North Campus. The Medical Center Campus also has minimal storage capacity, and has had to obtain a storage container in addition to using space within the building not originally designated for storage.

7. Projections

The President has overall responsibility for long-term planning for the College, based on anticipated state and federal appropriations, projected fee income, and miscellaneous revenue. The allocated campus budget has been consistent with these sources of income and no substantial change in this pattern is projected. Enrollment on the Medical Center Campus is expected to remain stable despite expectation of slight decline in overall College enrollment.

As one of its future construction priorities, the College plans to expand the Medical Center Campus. As currently planned, this expansion would primarily provide additional classroom and office space. The President and the campus administration are planning such expansion.

SUGGESTIONS AND RECOMMENDATIONS FOR STANDARD FOUR

None

STANDARD FIVE

FACULTY

1. Recruitment and Selection

Recruitment procedures at Miami-Dade Community College have changed due both to societal factors and to development and growth of the College. For example, available positions are more widely advertised to reach the largest and most diverse populations of potential employees. One objective which has remained constant is to employ personnel with a variety of backgrounds, experience, and training. The College continues to strive for a faculty representing a wide range of university backgrounds, ages, geographical origins, minority groups, and unique competencies.

The College *Procedures Manual* provides a uniform method for recruitment of new employees (see References 1 and 2). The most frequently used options are personal contacts, applications received by department chairs, area deans, or the Personnel Office, and advertising in professional journals. Advertisements of open positions are circulated throughout all campuses to alert current faculty of openings. This has always been an important means of recruiting. Changes in enrollment figures obviously affect the size of the faculty, though changes at one campus may not be characteristic collegewide. All administrative, instructional, and classified staff vacancies must be posted throughout the College for a minimum of five working days before the positions can be filled.

Department chairpersons usually initiate the hiring action. Area directors or deans sometimes assume this responsibility. All such recommendations are routed from the deans' offices to the Campus Vice Presidents, then through the Personnel Office to the President for submission to the District Board of Trustees. An appointment is final only when approved by the Board.

The initial interview of prospective faculty begins the orientation process. Department chairpersons are expected to inform new faculty about departmental goals and objectives. At the Medical Center Campus, orientation sessions are conducted by the Instructional Support Services Department.

The Medical Center Campus attempts to recruit faculty members who have at least a master's degree, with specialization in the field in which they teach. Due to the nature of specializations in the Allied Health area, nearly all of the program faculty have special state licensure and/or national certification, indicating their levels of expertise. Faculty hired with bachelor's degrees agree on a plan to complete master's degree requirements.

Candidates are required to submit a completed employment application (see Reference 3). This includes letters of recommendation from former employers, official transcripts, and other documentation of the applicant's qualifications for the position.

As the hiring process is usually initiated by the department chairperson, there is assurance that adequate consideration is given to the input of individuals responsible for the day-to-day operation of the programs. Selection is made after a personal interview with the candidate.

College Personnel Services carefully monitors the campus and College recruitment and selection procedures and policies. This insures compliance not only with the College's stated policies, but also with such state and federal requirements such as Equal Access/Equal Opportunity. Records are maintained for all applicants, and reasons for selecting or rejecting each candidate.

2. Faculty Organization

The faculty members of Miami-Dade Community College participate in a governance arrangement known as I-80 (see Reference 4). This "Governance Constitution of the Faculty Senates," a policy approved by the District Board of Trustees, establishes shared governance between faculty and the administration.

The Faculty Senates of the four campuses and the collegewide Faculty Senate Consortium constitute the primary channels for conducting the business of the faculty and provide communication between faculty and the administration. The Consortium is composed of the four Faculty Senate Presidents and representatives of each campus Faculty Senate.

Faculty Senate membership is limited to full-time personnel holding academic rank who are primarily engaged in the teaching of students, or in library, learning resources, support services, counseling or guidance service activities, and who are assigned to a particular campus.

The jurisdiction of the faculty in academic affairs is clearly defined by Article III, Section I, of I-80, the Senate Constitution. It describes the Faculty Senate's primary concern with the initiation, review, monitoring, and evaluation of collegewide policies and procedures, and with campus governance, which includes matters of educational policy, personnel policies, student affairs, and budgetary processes.

Each Faculty Senate has adopted bylaws or standing rules of order, consistent with I-80, which reflect the internal organization of its campus (see Reference 5). These records are maintained in a special section of each campus library for convenient inspection. They are also found in the Faculty Handbook of each campus. These handbooks give the faculty concise information concerning the origin, philosophy, purpose, and institutional goals of the College (see Reference 6). In addition, personnel policies, the governance constitution for Faculty Senates, student and instructional services, and administrative services are listed and explained. As the Faculty Handbook is an important resource document for faculty, it is recommended that it be updated.

The present governance arrangement between faculty and administration is most effective. At the Medical Center Campus, the Faculty Senate President is a member of the Campus Executive Committee, while the Campus Vice President is an ex-officio member of the Faculty Senate.

No major changes in faculty organization are needed at present or contemplated for the immediate future. On March 15, 1984, the faculty voted for the second time not to be represented by the AFL/CIO, American Federation of Teachers, United Faculty of Miami-Dade Community College.

3. Professional Competence

The qualifications of Medical Center Campus faculty are consistently appropriate and of a high caliber. Seventeen percent of the faculty have earned doctoral degrees. Reference 7 provides an analysis of faculty rank, degrees, and years of employment at Miami-Dade.

To be employed by the College, a nursing faculty member must be licensed in the State of Florida. A copy of this license is kept in the department files. Renewal of the license must occur every two years and depends upon the acquisition of twenty-four continuing education units. Several disciplines in the Allied Health professions must also show evidence of passing national or state licensing or certifying examinations.

Up-to-date faculty files validating academic and professional competence are maintained by the institution. Faculty members are asked to furnish the College with updated academic transcripts when appropriate. Each faculty member is evaluated by his or her department chairperson to validate professional competency. The evaluation form is signed by the faculty member, chairperson, dean and Vice President, and is also included in the faculty member's file.

The purposes of the campus are directed toward providing the appropriate and necessary educational training which enables the graduate to become a responsible member of the health care delivery system. Faculty in both the Nursing and Allied Health areas attend numerous continuing education courses each year. These seminars not only enable the faculty member to update skills but also provide an avenue for keeping abreast of the latest professional advances occurring in the field. The training and competence of the faculty are of the highest caliber to meet the purposes of the institution and the campus.

4. Professional Growth

Various opportunities for professional growth are offered to the faculty. The College grants leaves-of-absence for study, research, and travel (see Reference 8). For example, at the Medical Center Campus, since 1977, there have been two or more faculty each year who have been granted six-month professional development leaves. There is a limited departmental budget available to support faculty travel, and funds for this purpose are also made available through Staff and Program Development sources.

A very liberal leave policy for faculty permits scheduling two six-week leaves every three years. Faculty may also earn leave time by banking overload points for teaching assignments that exceed usual workloads. These leaves may be used to develop professional skills or to earn graduate credits. Tuition discounts at some local universities are offered to full-time employees of the College. The College offers six tuition-free credits per semester to all full-time faculty.

During annual performance evaluation, a review is made of the faculty member's professional growth, covering such areas as plans for continuing studies and achieving advanced degrees, plus other professional development in his or her discipline. Because of the necessity within some disciplines for re-certification, professional faculty demonstrate the responsibility for maintaining and increasing their expertise by attending classes and workshops on an on-going basis.

Information regarding faculty membership in professional organizations, attendance at professional meetings and workshops, and participation in in-service training during recent years was obtained by conducting a survey of Medical Center Campus faculty members. Of 123 questionnaires distributed to faculty, 77 (62%) were returned (see Reference 9).

5. Financial Security

Miami-Dade Community College offers full-time faculty members a 12-month contract, although ten-month contracts are also available (see Reference 10). The current instructional salary schedule is given in Reference 11. The College's salary schedule compares favorably with both state and national norms for community colleges (see Reference 12).

The institution's fringe benefit package approximates 25% of each faculty member's salary. The benefits include a choice of health and dental insurance plans, term life insurance, leave for illness, emergency, or personal reasons, and participation in retirement plans. Faculty members may participate in tax-deferred retirement plans through payroll deductions.

The College participates in the Florida Retirement System. Under this system, contributions are based on each member's salary. The College makes all retirement contributions. The current rate is 10.93% of gross earnings. Upon retirement, benefits are computed based on total years of service, value of each year of service, average final compensation, and age. Participants are vested in the system after ten years of continuous employment. Faculty benefits are summarized in Reference 13.

Annual increments recommended by the area head and approved by the President become effective with the beginning of the new contract year. Annual increments are three percent each academic year, unless otherwise designated by the District Board of Trustees.

Promotion to a higher academic rank is initiated by the chairperson and recommended by the area head and Vice President to the President for approval. Salary adjustments up to $1,000 per year may be approved.

6. Professional Security and Academic Freedom

A statement of principles of academic freedom to which Miami-Dade Community College and the Medical Center Campus subscribe can be found in the College's Policy Manual (see Reference 14). Copies of this document are located in area offices, the campus libraries, and the office of the Faculty Senate. Policy I-14, dealing with academic freedom, is also found in the Faculty Handbook. The Faculty Senate and the District Board of Trustees have adopted the 1940 "Statement of Principles," developed by the American Association of University Professors, in cooperation with the Association of American Colleges. These principles spell out the responsibilities of both the institution and the teacher. They also speak to the teacher's role as a citizen, a member of a learned profession, and an officer of an educational institution, ensuring that faculty members are secure in their freedom to teach and investigate, and in their rights to participate as community citizens.

A faculty member is on annual contract during the first three years of employment. Continuing contracts may be awarded after this period to instructional personnel who meet the minimum standards described in the College Policy Manual. Faculty members with continuing contract who are charged with cause for dismissal or suspension are entitled to hearings (see Reference 15).

7. Work Loads

Miami-Dade Community College has a point system for the assignment and distribution of work loads (see Reference 16).

The minimum workweek for instructional personnel is 35 hours. The distribution of the weekly work period for teaching faculty is 15 to 20 contact hours of teaching, five hours of research or preparation, which may take place off-campus, and five office hours for student conferences. The remainder of the time may include such activities as course development and preparation, meeting with students, committee assignments, sponsorship of organizations, and in-service training.

Every effort is made to develop work schedules that are reasonable and equitable. The Miami-Dade Faculty Assignment System defines minimum work loads and establishes a system for rewarding faculty members who assume additional responsibilities.

8. Criteria and Procedures For Evaluation

The evaluation of faculty members is based upon professional performance, professional growth, and contributions to the College (see Reference 17). Emphasis in the evaluation process is on the objective assessment of job performance over the total evaluation period, without regard to personalities and isolated events. The employee is rated by the immediate supervisor, on the College evaluation form, as competent, satisfactory with reservation, or unsatisfactory (see Reference 18).

The criteria used in the campus evaluation form were developed by a Medical Center Faculty Senate committee. The criteria were submitted to the faculty for approval (see Reference 19). In 1982, a survey was taken to ascertain whether faculty still preferred the criteria and evaluation form. The answer was affirmative. The democratic method that has been employed in the development and adoption of the evaluation criteria assures that faculty both understand and accept them. A proposal for revision may be initiated by any campus Faculty Senate. Any revision would be submitted to the faculty as a whole for adoption or rejection.

In the faculty evaluation process, the immediate supervisor discusses the evaluation statements with the faculty member. They review achievement of previously identified goals and set department-related goals for the next year. Faculty members may also wish to set personal goals at this time.

At the conclusion of the discussion, the employee signs the evaluation form. The signature does not imply agreement with the evaluation, but acknowledges that it has been reviewed. The employee may include objections on the form or in an attached memorandum.

In the evaluation process, additional comments may be added by each reviewer. These comments are brought to the attention of, and initialed by, the faculty member. A final copy of the evaluation is given to the faculty member.

9. Promotions

Recommendation for faculty promotion is made by the department chairperson to the dean, then to the area head or the Vice President. The Faculty Senate President monitors the promotion process. The request for promotion is reviewed by the District Personnel Office to ascertain whether criteria have been met. If so, the recommendation is sent to the President for approval.

The criteria for promotion directly reflect the quality of performance of the individual and include performance as a member of the faculty, experience and length of service, educational preparation, professional standing and growth, and community service (see Reference 20).

10. Part-Time Faculty

The campus has little difficulty recruiting and retaining qualified part-time faculty. All part-time faculty are hired on an as-needed basis, term to term. Thus there is no contractual security for part-time faculty.

Selection of part-time faculty is made at the department level. The prospective faculty member submits an application, with references and transcripts, to the Personnel Department. The hiring department submits a Request for Personnel Action (RPA) to the area dean with a recommended salary. Thereafter, the department submits a Faculty Assignment Form (see Reference 21) for entry into the computerized Faculty Assignment Management Information System.

Raises in the pay scale may be recommended on an annual basis by the department chairperson. There are no fringe benefits provided for part-time faculty.

The department chairpersons supervise all part-time faculty. In some instances, a full-time faculty member may be assigned to work with the part-time faculty member. Chairpersons, or the supervising full-time faculty member, provides the new part-time person with course outlines, course objectives, catalog course descriptions, previous final and mid-term examinations, quizzes, and other course materials. The choice of the textbooks to be used is made by chairpersons and full-time faculty.

The evaluation of part-time faculty is made by chairpersons. There is no standard form or procedure for such evaluation. Standardization of the procedure used for evaluation of part-time faculty members is recommended.

11. Projections

Issues that concern faculty most are directly interrelated with other College, community, and state issues. As campus enrollment has stabilized, there are no anticipated changes in numbers of full-time faculty. However, major changes in the health care industry, as well as unanticipated action by legislative bodies, could require change.

Faculty salaries continue to be a primary concern at Miami-Dade, as at community colleges throughout the state. The legislative program for the 1985 State Legislature emphasizes the need to increase faculty salaries to reach the state goal of upper quartile standing among the 50 states. This legislative request represents joint activity and consensus of the Florida community colleges and the State Board of Community Colleges (see Reference 22).

Issues pertaining to faculty office space and facilities are addressed in other areas of this document.

SUGGESTIONS FOR STANDARD FIVE

None

RECOMMENDATIONS FOR STANDARD FIVE

Recommendation One: As the Faculty Handbook is an important resource document for faculty, it should be updated.

Recommendation Two: The procedure used for evaluation of part-time faculty members should be standardized.

STANDARD SIX

LIBRARY

General

The Medical Center Campus Library and the Audio-Visual Services Department are designed to support the curriculum of the Nursing and Allied Health program of the campus, as well as its general education and basic science courses. Included in their collections are books, periodicals, microforms, filmstrips, computer software, slide-tape programs, and other materials which are organized and maintained to facilitate use by students and faculty. The services offered by the library include circulation, reference, bibliographic instruction, reserves, periodicals, interlibrary loan, and access to other collections within the College and those of other institutions through consortium arrangements. The services offered by the Audio-Visual Services Department include delivery of equipment and audio-visual materials to classrooms, circulation of audio-visual materials for faculty and student use in the audio-visual study center, and access to other institution collections through consortium arrangements. The Audio-Visual Services Department also provides photographic, art/graphic, and television production. In 1978, the Audio-Visual Services Department was assigned responsibilities for distribution of equipment to support the Emergency Medical Services Department and for repair of biomedical equipment on campus.

The operation of the library is guided by a statement of purpose and goals (see Reference 1), which is periodically reviewed by the Dean of Student and Instructional Support Services and the Library Director. These goals stress support of the campus programs and the promotion of use of the library's facilities and collection through instruction, service-oriented atmosphere, and organization.

The operation of the Audio-Visual Services Department is guided by a statement of rationale drafted in May 1977 with input from all program chairpersons and deans (see Reference 2).

The Medical Center Campus Library and the Audio-Visual Services Department were considered a satellite branch of the North Campus at the time of the College's 1974 reaccreditation. They had been in operation at the Fred Ascher Allied Health Careers Building, located at Mount Sinai Medical Center of Greater Miami, since the fall of 1971. The library was granted its own budget in fiscal year 1975-76. The Audio-Visual Services Department followed a year later. All campus facilities moved to the present site in April 1977. Additional shelving and furniture were added to the library in 1978, increasing capacity and improving services.

The library seats 73 users and provides photocopying and microform equipment. Public-use computer terminals, added in 1984, link the user with the total College collection, widening the resources available to students and faculty members. The library's current collection includes over 10,000 volumes and 290 current periodical subscriptions.

The current library and workroom have 3,946 square feet. The library has requested a total of 20,015 square feet to meet long-range needs of the campus. This request includes capacity for 46,000 volumes, and accommodations for approximately 450 users and a full-time staff of ten. Short-term needs are for 14,000 square feet, for 25,000 volumes, 225 seats, and a staff of eight.

In May 1977, the audio-visual facilities comprised 4,149 square feet, which included a 24-carrel study center, an audio-visual materials and equipment distribution area, a television studio, and a master control room. In August

1978, 804 square feet were added when the department took over the responsibility of biomedical maintenance, with another 1,354 square feet added in 1984 to support a larger study center. The present size is 6,140 square feet. The Audio-Visual Services Department has requested total space of approximately 7,000 square feet when building expansion occurs. With respect to equipment, it is suggested that funds be provided to upgrade television studio equipment for videotape recording and editing.

1. Staff

The Medical Center Campus Library has a staff consisting of a director, a reference librarian, three library technicians, and a secretary. There are 35 years of community college library experience between the director and the reference librarian, 12 of these at the Medical Center Campus. The technicians have a total of 36 years of library experience, 21 of these at the Medical Center Campus. In addition to management duties, the director provides direct library services.

The process of selection, development, and retention of all library personnel must meet the standards and objectives established by the College's libraries as well as institutional policies. Librarians hold full faculty status and privileges. A master's degree in Library Science from an institution accredited by the American Library Association must be held by all professional library staff. The director is appointed annually on an administrative contract but is granted faculty rank for the purpose of determining salary. However, the incumbent also holds a continuing faculty contract. At least two years of college and two years of library-related work experience are necessary for entry into any of the technical positions at the Medical Center Campus Library.

Credit is given for additional years of responsible experience in lieu of education. The qualifications of the support staff who carry out the clerical work are determined by the skills needed.

Both the reference librarian and the director have master's degrees in Library Science from an accredited American Library Association school. For the director, supervisory experience is important. The current director has been a College administrator for 11 years, including director of Library Technical Services for four years.

The Medical Center Campus Library technicians are primarily responsible for the smooth operations of all library functions. A recent collegewide occupational study of library jobs evaluated all library support positions, and new job descriptions were developed to match current operations. As a result of the study, all three technician positions were upgraded. An individual, detailed description for each of the support positions is available in Reference 3. Due to the small size of the library, the considerable college and library experience of the technical staff aids them in decision-making and multiple, functional assignments. The library secretary is responsible for the clerical support of library operations.

Personnel actions regarding library personnel are governed by institutional policies concerned with promotion, salary, tenure, faculty status, fringe benefits, and working conditions. Self-improvment is encouraged and supported, including faculty study leaves and attendance at workshops where feasible.

The Medical Center Campus Audio-Visual Services staff consists of the Director of Educational Technology and Campus Operations, a television chief engineer, three audio-visual technicians, two engineers, an office manager, and a clerk typist. The director and the chief engineer have a combined total of 40 years experience in the field of audio-visual services. The technicians and engineers have extensive experience in their own fields, one having experience in digital circuits and microcomputer repairs.

In addition to the management duties in the audio-visual area, the director is responsibile for overseeing custodial services, security, mailroom, duplicating services, and telephones.

The Audio-Visual Services staff is primarily responsible for the smooth operation of all audio-visual functions. Over six years ago, the Personnel Department conducted an occupational study of all audio-visual jobs, evaluated all positions, and standardized collegewide job descriptions to match current operations. An individual detailed description of each position is available in Standard Three, Reference 12.

2. Budget

The campus administration has always been very supportive of the Medical Center Campus Library. Additional support is given to Audio-Visual Services (see Reference 4). When there have been equipment needs, the campus administration has approved the requests and funded them whenever possible.

On a collegewide basis, a massive up-dating of the on-line circulation and periodical systems has been undertaken recently. The College administration, computer systems, and programming areas have been most supportive in dedicating personnel and equipment to the revision of these systems. The initial expenditure for new equipment was funded by the Computer Services budget. In order to maximize the use and access of audio-visual materials, an on-line booking system went into operation in January 1985.

The Sentronics security protection system for the library has been in use since 1971. The basic equipment was transferred from the Fred Ascher Allied

Health Careers Building to the present location. The library is now requesting replacement of the old system, which can no longer be maintained. It is suggested that the library receive funding to replace the old security system. This is a collegewide need and is being coordinated with the other campus libraries.

The Audio-Visual Steering Committee is composed of the four campus directors and the Director of Media Production. Working with an external consultant, they designed a plan for replacement of audio-visual equipment, which was approved by the President's Council in 1983 but never funded. The major expenditure for new equipment for the campus occurred in 1976-77 when the new facility went into operation. Limited funds ($20,000) for replacement were available in 1983-84, but with budget cuts in 1984 no funds are likely to be budgeted for this purpose. It is suggested that the funds be provided for the audio-visual equipment replacement plan.

The appropriation of funds for films has increased an average of 4% each year since 1980, and in 1984 was $12,347, with an added $28,147 for educational materials and supplies. Since 1978, the regular annual appropriation for library materials has increased from $18,700 to $28,709.

In order to help ensure that adequate planning for acquisition of resource material is done for new courses and academic programs, the library director and the Audio-Visual Services director are members of the Campus Curriculum Committee. There is also a new curriculum approval process which provides for learning resources support.

3. Resources

The library at Medical Center Campus supports the curriculum offered at the campus (see Reference 5). It is a special library with holdings primarily in the area of Allied Health. Approximately 68% of the book collection, 87% of the journal collection, and 90% of audio-visual materials are devoted to medically-related subjects. The general science materials stress subjects such as biochemistry, microbiology, organic chemistry, biophysics, parasitology, optics, human anatomy and physiology, and cytology. There are also support materials for the general education curriculum in the areas of composition, grammar, humanities, social science, mathematics, and general science. The collection is designed to fulfill basic and supplemental needs of students in the campus programs. Extensive reference sources, specialized texts and manuals, in-depth research materials, review guides, classics in several fields, and comprehensive journal holdings provide a wide range of resources for students in the Allied Health and Nursing fields. Continuous addition of new publications and updated editions, plus current subscriptions to pertinent journals, series, and indexing services, provide up-to-date information in each campus program field. See Reference 6 for bibliographies in each program area, discipline and reference.

The periodical collection includes extensive backfiles in both microform and bound formats. The 290 current subscriptions include indexing services, standard medical journals, nursing and allied health journals, and general interest magazines. The holdings records are maintained on-line and are available both through the public-use terminals and various print-outs (see Reference 7). The library's holdings are included in the union list compiled by the University of South Carolina.

Faculty members are encouraged to initiate requests for new materials to be added to the collection. In order to identify new materials, the library's collection is matched against published bibliographies in the fields of Allied

Health and Nursing. Other materials are identified through publisher's advertising and professional journals. All program-related items recommended for selection are sent to the department head for approval. A similar system of approvals is required for purchase of audio-visual materials.

Questions on recent library surveys were designed to emphasize continued need for active participation of the faculty in selection of materials. A significant percentage of faculty and students responding to the surveys consider the resources to be excellent. The collection is also in demand through interlibrary loan.

The director teaches a continuing education course for the Medical Library Association on Allied Health Literature, based on the collection at the Medical Center. This course is taught to medical librarians around the country.

The current book collection is over 10,000 volumes and the shelving capacity is approximately 80% full. At the present time the library adds about 500 new volumes per year. The rate of growth of the collection is being closely monitored, with emphasis on quality items, because of space and staff limitations. Limited support for general education offerings is provided, relying also on the availability of materials on the other three campuses. Table 1 shows the growth pattern of the collections since 1977.

All Miami-Dade Community College libraries use the Dewey Decimal Classification System and Library of Congress subject headings. Books are ordered, cataloged, and processed by Library Technical Services using the OCLC (Ohio College Library Center) system. The Medical Center Campus Library maintains a card catalog and shelf list for book materials located on this campus. An annual inventory provides a basis for replacement of materials which are missing or which need repairs or other physical attention. Inventory results are essential for fiscal accounting of capital outlay expenditures. All print materials

Table 2

Medical Center Campus Library Collection Growth, 1977-84

	Type of Collection				
	Books		Bound Periodical	Periodical	Microform
Fiscal Year	Titles	Volumes	Volumes	Subscriptions	Units
1977-78	4,441	6,593	768	209	653
1978-79	5,135	7,471	847	251	1,310
1979-80	6,007	8,579	915	257	1,644
1980-81	6,422	8,835	1,037	260	1,985
1981-82	6,963	9,429	1,137	268	3,106
1982-83	7,370	9,879	1,226	268	3,598
1983-84	7,701	10,288	1,469	290	3,616

Data Source: Medical Center Campus Library.

are evaluated in an on-going weeding process to identify and discard outdated items. A written collection development policy is being designed to provide guidelines for selection, retention, and withdrawal of books. The four campus libraries are developing standards for cooperative purchasing of journals and improved document delivery.

Book materials, bound periodicals, and the information file are maintained in open-stack style for easy access by library users. Current periodicals (unbound), microfilm, microfiche, and reserve items must be requested by title at the service desk. Approximately 15% of the collection is located in the reference area where information is readily available to all patrons. A leisure reading collection of books, magazines, and local newspapers is provided for use by faculty, staff, and students.

The on-line computer system recently implemented allows a library patron to search for books by author, title, broad subject, or call number, in order to determine location and availability of holdings from all libraries of the College. Local reserve items may be searched by course number. A patron may verify books he or she has checked out. Periodical titles and holdings at any campus are also available for on-line searching (see Reference 8). The audio-visual booking system, fully implemented in January 1985, permits a patron to search materials by title, audio-visual code, and by broad subject heading, and to determine an item's location and availability. This system does not permit access to other data bases. It is suggested that the library be supported in its efforts to add access to on-line data bases as one of its services.

4. Services

The library at Medical Center Campus strives to provide quality service to its users. Within the limitations of space and staff it attempts to meet the needs of the students and faculty. Because of the small size of the campus, personal contact is possible with most of the faculty. The director is not only visible but accessible.

Recent surveys were made seeking the opinions of the student body and of the faculty and administration regarding the library's services (see Reference 9). The library received very high marks for its services. Because the Allied Health and Nursing programs of the campus are technical in nature, the library stresses bibliographic instruction as a part of the instructional program. Bibliographic instruction includes specially tailored classes, customized guides to the library for most programs, extensive one-on-one instruction, and coordinated library assignments. Over 80% of the students surveyed felt that these efforts were helpful and the faculty agreed. The library continues to develop new materials and handouts in this important area (see Reference 10). The Audio-Visual Faculty Manual describes audio-visual departmental services and procedures (see Reference 11).

The library strives to offer professional reference assistance during all service hours. This is difficult with only one full-time reference librarian and supplemental hours by the director. Reference services consist primarily of assistance in selection of specific materials, location of information and, as mentioned, instruction in use of indexes, catalogs, reference tools, and resources. The surveys rated the service excellent and the staff very helpful. However, better service could be provided with addition of another professional. It is suggested that another librarian be added to the staff.

Other services are designed to provide or improve access to materials. The reserve collection makes additional instructional materials available as assigned. This service includes requesting copyright clearances (see Reference 12).

Although the library has provided automated circulation systems since 1971, the new on-line system, which became operational in 1982, has greatly improved this function. It features immediate data on both patron and book, automatic overdue reminders, hold/recall information, comprehensive statistics, and low-error operation by the use of bar codes. The data base has provided the basis for the development of an on-line catalog. The sub-systems for inventory, reserves and subject bibliographies have greatly enhanced library operations and services to the faculty. The surveys showed that patrons find the circulation system excellent and very "user friendly." Reference 13 lists annual circulation statistics since 1977.

The library also offers access to other materials through intra/interlibrary loan services. The majority of these patron requests involve non-medical materials and are borrowed from other campus libraries or area institutions. Most of the requests to lend materials are for the specialized Allied Health collection (see Reference 14).

The physical facilities for the library are attractive, with good light, white shelving, and oak furniture. The reading area contains study tables and carrells, plus shelving. The reference materials, microform equipment, and lounge are in the same area. Adjacent to the entrance is the service counter for circulation, reserves, and periodicals. Equipment lists for both the library and audio-visual areas are given in References 15 and 16, respectively.

The significant low marks in both surveys concerned space, number of seats, and noise level. The library is frequently crowded and the noise level exceeds acceptable limits. The library needs to be significantly expanded, to seat more patrons, and to provide for quiet study and group study areas. The shelving capacity also needs to be expanded to better support the general education programs. It is recommended that the library be significantly increased in both shelving and seating capacity.

Three-quarters of the students surveyed found the library's hours convenient. The library is little used after five p.m. since most evening classes begin at that time. Currently, the library is open five days a week for 51 hours of service. Reference 17 gives gate counts, room counts, and reference activity for the current year.

The Council of Campus Managers of Medical Center Campus, which has representation from the faculty, administration, staff and students, serves in the capacity of library advisory committee. The Council provides a forum for the exchange of information and each member acts as liaison with the groups and areas represented. This group meets monthly. It is recommended that the process by which the Council of Campus Managers serves as the library advisory committee be formalized.

5. Institutional Relationships

Over the last few years Miami-Dade Community College libraries have increased access to additional resources. In addition to the public-use terminals, which give library users bibliographic access to the collections of all four campus libraries, a library agreement has been adopted among several of the academic institutions which are members of the Southeast Florida Educational Consortium (see Reference 18). This provides on-site borrowing privileges, quid pro quo interlibrary loans, and the exchange of journal holdings lists. The agreement also applies to audio-visual materials.

The Medical Center Campus Library is also a full participating member of the Miami Health Sciences Library Consortium (see Reference 19). This group of area medical libraries offers access to members' collections through free interlibrary loans and shared periodical holdings lists. The hospital libraries in the campus clinical affiliates have, for the most part, allowed students access to materials while on clinical assignment.

The effect of outside users has been minimal on this library. Interlibrary loans have increased, but so have the sources from which the library can borrow. Since the library has always been used by few members of the general public, the addition of a few Consortium borrowers has made no appreciable difference. To date, the library has suffered no diminution of materials resulting from these agreements.

6. Projections

The Medical Center Campus Library projects moderate expansion from 1984 to 1989 attributable to increasing campus needs. Most of the projected changes would improve services. These could include on-line searching of national data bases, current awareness service, customized acquisitions lists, a video tape for bibliographic instruction, and on-line acquisitions.

Hopefully, the library will gain the space needed to serve the current clientele in less crowded conditions, additional shelving, study rooms, a typing room, and facilities for individual microcomputer use such as those available at the Wolfson Campus of the College.

The collection should experience a slow growth of about 1,500 volumes and ten to fifteen new journal subscriptions each year, to a projected 17,500 books and 350 subscriptions by 1989.

The expansion of facilities should be the major expenditure over the next five years. However, funding will also be needed for replacement of the security system, provision of on-line searching equipment, and a cathode ray tube and printer for the on-line acquisition system.

The staff will probably expand by one professional and one technician, to provide appropriate and necessary services.

The Audio-Visual Services Department also projects increases in its collection and services within the next five years. The building of a new facility would provide additional space for the collection and provide service to patrons in less crowded conditions. Funding for upgrading of videotape recording and editing capabilities, the audio-visual equipment replacement plan, and on-line materials search capabilities would enhance departmental services.

SUGGESTIONS FOR STANDARD SIX

Suggestion One: Funds should be provided for the campus audio-visual equipment replacement plan.

Suggestion Two: Funds should be provided to upgrade campus television studio equipment for videotape recording and editing.

Suggestion Three: The campus library should receive funding to replace the old security system.

Suggestion Four: The campus library should be supported in its efforts to add access to on-line data bases as one of its services.

Suggestion Five: The campus library should have an additional librarian.

RECOMMENDATIONS FOR STANDARD SIX

Recommendation One: The campus library should be significantly increased in both shelving capacity and seating capacity for the students.

Recommendation Two: The process by which the Council of Campus Managers serves as the library advisory committee should be formalized.

STANDARD SEVEN

STUDENT DEVELOPMENT SERVICES

General

Student and Instructional Support Services is responsible for providing student development services and offers a wide array of support programs and services designed to complement and strengthen the instructional objectives of each academic program. These support services seek to provide students with an environment conducive to learning and are further intended to help them make proper adjustment to the campus as well as to their chosen professions. The area operates on the premise that a comprehensive education includes learning not only within the classroom but outside the classroom.

Student development services also seek to eliminate or limit financial, social, and physical barriers that stand in the way of students realizing their career potentialities. Finally, programs and activities are developed to promote student growth, integrity, and community and professional responsibility.

1. Administration

The Dean of Student and Instructional Support Services has primary responsibility for student development services and reports to the Campus Vice President. The Dean is one of the principal administrative officers of the campus and is a member of the Campus Executive Committee, the Council of Campus Managers, and the Collegewide Committee on Student Affairs. The Dean has overall responsibility for the organization, supervision, and coordination of all aspects of student development services, including the management of seven departments: Academic Services; Admissions, Registrations and Records; Arts and Sciences; Instructional Support Services; Library; Student Activities and Organizations; and Student Financial Aid. Goals for each of these areas are contained in Reference 1. In addition, the Dean of Student and Instructional Support Services serves as coordinator for Faculty, Staff and Program Development activities, Veterans Affairs, Disabled Student Services, campus Affirmative Action goals, and student disciplinary matters. The Dean's immediate staff consists of an associate dean, three directors, the Registrar, and three chairpersons.

The Medical Center's current Dean of Student and Instructional Support Services has an earned Doctorate of Education, ten years experience in student services administration, and has participated in numerous recognized workshops and seminars within the field. Four members of the professional staff have earned doctorates and four have master's degrees. All professional staff and career employees have received specific training and/or instruction in their respective fields. Participation in national and state professional associations by the professional staff and career employees is encouraged and supported. Reference 2 provides information on all professional staff members for the area, indicating their training and qualifications for the positions they hold and the services they perform. Reference 3 provides detailed staffing for the entire area.

2. Counseling and Guidance

The counseling and guidance responsibilities are shared by the Advisement Services Department and by instructional and non-instructional faculty. Counseling support for students is available at several levels. The first is provided by the general faculty and the Advisement Services staff as they meet with students for academic advisement. Students with serious personal problems may be referred to the Chairperson of Advisement Services or to one of two psychologists located at the North and South Campuses. Students who appear psychologically unfit and therefore unlikely to benefit from admission or continued enrollment at the College are processed according to College procedures (see Reference 4).

The counseling referral process is not well established or publicized at the campus level. It is recommended that the campus review counseling services in respect to referral process and level of support.

Academic advisement/guidance is provided by the Advisement Services staff, and instructional and non-instructional faculty. The Advisement Services staff provides the following:

a. Information on program and degree requirements for all College offerings;

b. Updating and maintenance of the Advisement and Graduation Information System (AGIS), to reflect changes in requirements or procedures;

c. Training of faculty in the advisement and counseling function;

d. Transcript evaluation for all transfer students;

e. Collection, processing, and certification of all graduation applications;

f. Advisement, counseling, and referral, as appropriate, for all students not yet accepted into one of the Nursing or Allied Health programs;

g. Advisement and counseling for students who have special needs, such as handicapping conditions, learning difficulties, deficient academic progress, or personal or social problems;

h. Limited career advisement.

All faculty have advisement defined as a work responsibility. Arts and sciences faculty, along with the non-instructional faculty, advise pre-program students in coordination with the Advisement Services Department. The Nursing and Allied Health Technologies faculty advise their respective program students and provide pre-program students with program requirements at scheduled information sessions.

All pre-program and program students must have an advisor's approval before registering for Medical Center Campus courses. The approval requirement insures a one-on-one advisement process based upon the most up-to-date information about the student's academic skill level, academic progress, and academic goals. Advisors use AGIS reports, which provide this information. Work load, financial support, and family responsibilities are important personal considerations in the advisement process.

Transcript evaluation of international students follows the same process as that for other transfer students. An assessment of the student's past academic record is made, taking into account the accreditation status of the institution(s) previously attended. Following this assessment, credit is awarded for all coursework determined to be comparable or equivalent to Miami-Dade courses. To be considered for admission, international students must demonstrate competency in the English language by obtaining at least a minimum established score on the Test of English as a Foreign Language (TOEFL) or the Michigan Test. Upon admission to the College, and for placement purposes, international students are further required to take a Basic Skills Assessment Battery. International students receive special assistance regarding their entrance requirements by a person designated by the Admissions, Registration, and Records Office. Counseling and advisement for personal, educational, and vocational needs are addressed individually in Advisement Services with the international student as with other students.

Disciplinary matters are not a function of the office of Advisement Services and are discussed later under this Standard.

Each program at the Medical Center Campus conducts a number of information sessions for prospective students throughout the year. These sessions, conducted by program faculty and staff, provide a detailed description of the program, requirements for admissions, coursework involved, clinical experiences, and other pertinent information regarding enrollment in the program. Participants are provided with information packets which contain all application and program entrance materials. These packets are also made available by individual request. In addition, the first Fall Term edition of the campus student newsletter, *The Antidote*, is primarily devoted to providing new students with orientation information (see Reference 5). Program information packets are provided as previously described (see Standard Three, Reference 6).

The faculty and staff members who provide guidance and advisement to students participate in a variety of in-service training activities. An on-going responsibility of the Advisement Office is to continually update faculty on new College academic requirements and procedures and to provide training and orientation for new faculty. *An Advisement Information Handbook* has been developed for training sessions for faculty and staff (see Reference 6). This handbook is used as an additional academic advisement source document. Evaluation forms are distributed after each large group training session and are evaluated by the Advisement Office. Informal feedback is the method of evaluation for small group and individual sessions.

Overall evaluation of the area occurs in annual planning and goal-setting meetings. The results of evaluation forms received from training sessions, and direct feedback from faculty and students, are the bases for planning and setting goals.

Career planning is addressed through student-advisor interaction as part of the enrollment process. The close working relationships with faculty and department chairpersons, in combination with the clinical experiences of students in health care settings, provide ample opportunities for graduates to secure career-related employment. Each semester, health care agencies and related organizations are invited to a Career Day Program through which students may obtain information from prospective employers. Part-time employment opportunities available to students are posted routinely. Due to the demand for the specialized career skills of graduates, and the success with which students have been placed in career-related employment, there is no indication that this process will change, nor is a need seen to establish a placement office.

3. Extra-Class Activities

With exception of the Emphasis on Excellence Program, all extra-class activities are the responsibility of the Coordinator of Student Activities. The duties of the coordinator include advising the Student Senate, supervising coordination of all student associations and clubs, and supervising the organizing and scheduling of various campus programs and activities, including the annual high school open house and Medical Center Campus graduation. The coordinator further serves in a student advocate capacity, working directly with appropriate campus officials to resolve non-academic problems.

The Office of Student Activities consists of the coordinator and a half-time secretary. Financial support for campus student activities programs is derived from student fees, amounting to over $25,000 annually. The campus administration augments this amount by providing for salaries and the operation of the office. The heavy academic workload usually associated with health-related programs, as well as the rigid nature of course scheduling, limit extra-class activities at the Medical Center Campus.

The facility inhibits extra-class activities, since the campus does not have a dedicated student center or an auditorium large enough to accommodate a major production. Major campus events are usually presented in the open atrium area of the building. Faculty and staff are generally supportive of activities held on campus, particularly program-related events and major functions such as the high school open house. It is recommended that an auditorium be constructed with seating capacity of at least 600 and facilities for stage seating and at least minimal production.

With the exception of the Student Senate and the Phi Theta Kappa Honor Fraternity, all organizations and clubs on campus are program-related and, as such, directly address professional and community responsibilities. Even though the campus encourages the formation of organizations and clubs that provide more variety and diversity, these generate little student interest. Reference 7 lists all currently active clubs and organizations on the Medical Center Campus. Policies governing student organizations are detailed in the Organization Handbook (see Reference 8).

The campus newsletter, The Antidote, is published monthly and is primarily informational, providing students and staff with program-related articles and campus information. Since no journalism courses are offered on campus, the staff consists of student volunteers. A faculty advisor and the Publicity and Community Affairs Coordinator have responsibility for layout, printing, and distribution of this publication.

The campus provides safeguards to protect campus property and the rights of visitors, students, and the entire campus community. The Medical Center Campus employs an identification system which requires all faculty, staff, students, guests, and visitors to wear a visible campus identification badge. These measures have been initiated to minimize the entry of unauthorized persons to the campus. All clinic patients, visitors, and guests are required to sign a register at the security station located at each entrance to the building. Entry to the parking lot is restricted to authorized vehicles by use of a card-controlled gate system. Persons creating a disturbance on campus are asked to leave and are escorted out of the building by security personnel. Incidents on campus involving students or visitors have been minimal. Students park free in a monitored lot, seven blocks from the campus. The College provides shuttle service to and from the lot.

4. Student Participation in Campus Governance

The Student Senate is the vehicle through which students are able to participate in the governance process of the Medical Center Campus. Representatives from each student organization and academic program, including pre-program students, comprise the membership of the Student Senate. A member from this body, usually its President, is chosen to represent the Student Senate on the Council of Campus Managers. The Student Senate President is also an invited observer at all Faculty Senate meetings. The Student Senate is supported by the faculty, administration, and students. However, student participation within the organization has fluctuated. The Coordinator of Student Activities serves as advisor to the Student Senate. The Student Senate Constitution appears as Reference 9.

5. Student Discipline

Miami-Dade Community College makes every effort to provide students with an educational environment conducive to a free exchange of ideas and philosophies. Additionally, the College strives to provide opportunities for developing and using critical judgment, and opportunities to gain practical experience. The College's expectation with respect to discipline is that students will interact within the educational community responsibly and maturely. Student Rights and Responsibilities, a student handbook, is made available to all students. This handbook enumerates the essential provisions for student freedom and the responsibilities of the student as they pertain to these freedoms (see Reference 10). A code of conduct is specifically identified in the handbook.

In addition to this document, disciplinary standards are stated in several other publications available to students, faculty, and the general public. The source of all statements and the legal authority related to student discipline is found in the College's Policy Manual (see Reference 11).

The Student Rights and Responsibilities handbook provides a description of disciplinary procedures. Students are afforded due process at each level, and all disciplinary situations receive a full investigation and a hearing if necessary. The campus official charged with administering student disciplinary processes is the Dean of Student and Instructional Support Services. The Dean also assists students and staff with grade appeals procedures and with situations involving academic dishonesty.

6. Student Records

The Admissions, Registration, and Records Office has responsibility for student records. The Registrar is the person responsible for operation of the office. The admissions, registration, and student records areas each have a manager and staff responsible to the campus Registrar.

The admissions and registration area collects and initially houses all information and documents pertaining to students' College admission and registration. These documents include the admissions application, the Florida residency affidavit, official high school and postsecondary transcripts, required international student documentation (e.g., TOEFL scores and visa information), and other applicable forms and information relating to admission. Other information obtained at different stages during the student's enrollment includes name and residency changes, enrollment certifications, CLEP results, and student correspondance. All of this information is used to create the Student Master Record and becomes the basis for the student's history at Miami-Dade. It is also an identifier of former students and the means of updating master records.

The transcript is the official document which reflects the student's academic work at the College. The transcript shows all coursework at the College, including withdrawals, courses in progress, grades, transfer credits, College Level Academic Skills Test (CLAST) scores, high school attended and graduation date, degrees earned, cumulative and semester grade point averages, and credits attempted and earned. Information contained on the transcript also provides the basis for the Advisement Graduation Information System (AGIS) report, which is the primary document used for advisement and counseling (see Reference 12).

A student's academic record is made available to faculty or staff of the College who can demonstrate need for such information. The Registrar maintains a log of records released and the purposes for their release. Outside agencies may review a student's record with written permission from the student or a courtordered subpoena. Students may also review their own records upon request.

On receipt of the student's application, a file is created both in hard copy and within the College's on-line computer files. As additional documents are received, both files are updated and the file folder is permanently housed in the student records area of the office. One year after students become inactive, their computer records are transferred to a batch file and, after two years of inactivity, the hard copy file is stored on microfiche in the records office. For security purposes, a duplicate copy of all microfiche documents is sent to National Underground Storage, Inc., Bayers, Pennsylvania. The campus anticipates no changes in this system.

7. Student Financial Aid

The Financial Aid Office provides students with financial support and counseling. The student Financial Aid Program is coordinated at the College level and is administered on campus by the Financial Aid Office under the supervision of the Director of Financial Aid.

Financial Aid at Miami-Dade consists of scholarships, grants, loans, and work assistance programs. A list of the major assistance programs which the Financial Aid Office administers, and the primary sources of their funding, is as follows:

Federal Services	Type of Program
College Work-Study Program	Employment
National Direct Student Loans	Loan
Pell Grants	Grant
Supplemental Educational Opportunity Grants	Grant
Guaranteed Student Loans	Loan
PLUS/Auxiliary Loans	Loan

State Sources

Florida Student Assistance Grants	Grant
Florida Academic Scholarships	Scholarship
Florida College Career Work Experience Program	Employment
Florida Dependents of Disabled and Deceased Veterans Scholarship	Scholarship

College Sources

Need Scholarships	Grant
Service Grants	Scholarship
Presidential Scholarship Program	Scholarship
William L. McKnight Scholarship	Scholarship
Student Assistant Program	Employment
Short Term Loans/Book Loans	Loan
Foundation Awards	Scholarship/Loan

Other Sources

Donor Scholarships	Scholarship
Veterans Administration Benefits	Entitlement
Vocational Rehabilitation Assistance	Entitlement

A description of these programs, including their award criteria, is found in the campus financial aid handbook, Money Matters: A Guide to Financial Aid (see Reference 13).

Applications for federal and state financial aid funds are made at the College level based on the aggregate needs of the campuses. Decisions regarding fund allocation and campus distribution are facilitated through the Collegewide Financial Aid Committee, of which the campus Financial Aid Director is a member. This committee is further responsible for planning the most efficient and effective use of available funds.

Each student requesting need-based assistance is required to submit to the appropriate agency a completed application and supporting documentation. No financial aid awards are made until all required forms have been processed and an approved needs analysis completed. Financial aid, with the exception of academic scholarships and short-term loans, is awarded solely on the basis of need.

Information regarding the programs of assistance available at the College, as well as a description of the application process, are provided in the College Catalog and in a variety of College publications and recruiting materials. The Financial Aid office routinely schedules financial aid workshops for students and parents.

8. Health Services

The campus does not treat major medical emergencies. Students sustaining injuries which require more than minor first aid are taken or referred to the emergency room of Jackson Memorial Hospital, approximately two blocks from the campus. If other than minor first aid is required, the ranking campus security officer determines the best mode of transportation to the hospital. If necessary, an ambulance is called. With the exception of injuries sustained by student assistants in relation to their employment, students are responsible for payments to the hospital for services rendered.

First aid kits for minor injuries are located in all laboratories and in the Security Office. All accidents reported to the Security Office are recorded on an injury report form. Procedures for medical emergencies are outlined in the General Information and Security Handbook, which is distributed to all faculty and staff (see Standard Eight, Reference 8). As an admissions requirement, program students must submit a physician-completed health appraisal form.

9. Student Services Studies and Projects

The Academic Services area routinely surveys students regarding their perceptions of the advisement and testing services. These surveys are mailed to students and administered to selected classes each term. The results (see

Reference 14) are used to improve the advisement and testing services. The library has conducted a similar survey, discussed under Standard Four.

The College Office of Institutional Research conducts follow-up studies which ask program graduates to rate the services provided by the campus. As a result of the information from those surveys, the service hours of the Financial Aid Office, the Admissions, Registration and Records Office, Advisement Services, and the library have been expanded to serve evening students.

As a result of low student participation, the campus has reconstituted the Student Senate. New representation guidelines provide for more consistent student participation in campus governance. Additionally, the role of the Coordinator of Student Activities has been redefined to include service as an ombudsman for students. In order to support this change, the Coordinator's office has been relocated to the student lounge area. No additional changes are planned for the student development area.

10. Projections

Based upon the concerns expressed about the level of counseling support, the Student Services area is scheduled to conduct an in-depth study of the current level of counseling support and submit recommendations for improving the counseling services offered at the campus.

The campus has submitted plans for increasing office space for the Student Service areas. Included in the plans is a request for an auditorium with at least 600 seats. The campus will consider the need for an auditorium as a high priority when seeking capital funds.

SUGGESTIONS FOR STANDARD SEVEN

None

RECOMMENDATIONS FOR STANDARD SEVEN

Recommendation One: Construction of an auditorium with a seating capacity of at least 600 seats and facilities for stage seating and at minimal production should be considered in plans for additional facilities.

Recommendation Two: The Medical Center Campus should review counseling services on the basis of need, referral process, and level of support.

STANDARD EIGHT

PHYSICAL RESOURCES

General

In July of 1971, the North Campus Division of Allied Health Studies was transferred from its North Campus location to a new complex adjacent to the Mount Sinai Medical Center of Greater Miami on Miami Beach. This two-story, 43,713 square-foot educational facility, the Fred Ascher Allied Health Careers Building, was leased to the College and housed all division programs except Dental Hygiene, Vision Care Technology, and Mental Health Technology. The complex was constructed with contributions provided by Mount Sinai Medical Center of Greater Miami and a federal Allied Health Professions Construction Grant. The first classes were held in the Fred Ascher Building in August 1971, operated as an extension of the North Campus.

Shortly before the designation of the Medical Center Campus in July 1974, specifications were written by the Allied Health and Nursing faculty and others for a new facility to be located at 950 Northwest 20th Street, within the City of Miami. This 4.3 acre site had been transferred to the College by the Dade County Board of Public Instruction in November 1967. The area is located within the civic center and medical complex consisting of the University of Miami School of Medicine, county-operated Jackson Memorial Hospital, the Veterans Administration Hospital, the Dade County Public Health Service, and other private and public health facilities (see Reference 1). Working drawings and architectural specifications for the 117,012 square-foot, three-story facility were completed in November 1974. Construction for the $6.2 million building began in

March 1975. Upon completion of the campus in March 1977, personnel and equipment were moved from the two interim locations, the Fred Ascher Building and North Campus. The campus was dedicated in May 1977.

1. Description of Campus

With the exception of the bookstore and classroom portables, the campus is self-contained within a three-story structure, Anna Brenner Meyers Hall. This building was specifically designed to accommodate the activities of the campus--academic, student services, administrative, and operational support--and the general layout is organized to provide logical and orderly flow of traffic throughout the complex. The heavy traffic areas are located on the first level. These include two clinic facilities, a multipurpose auditorium, security and maintenance offices, and lobby areas. The second level consists of classrooms, laboratories, student services offices, the library, and audio-visual services. The third level houses additional classrooms, laboratories, and faculty and administrative offices. The building is flexible in design so that rooms can be easily converted to other functions. The Audio-visual Department is strategically placed in the center of the building for maximum access to all areas. The educational specifications for the Medical Center Campus are given in Reference 2. The floor plans are in Reference 3.

A bookstore/classroom built in 1978 adjacent to the main facility was renovated in 1982 to make the entire structure a bookstore. Later in the same year, two portable classrooms were installed on the southwest area of the of the campus. Two additional portables were obtained in the summer of 1984 to house the Learning Resource Center and its support services. All campus facilities, including the portable units, are accessible to the handicapped.

A description of selected areas of the campus is provided in Reference 4, with a more detailed description of each room, by use, given in Reference 5 in the Physical Facilities Inventory Report.

Building specifications, including affixed equipment for clinic and laboratory areas, were developed in consultation with program advisory committees. Campus furnishings and office layouts are, for the most part, modular and open in design, allowing flexible expansion and efficiency in air handling and climate control. Current furniture and equipment inventories include 2,866 items worth over $200 each, with total value of $2,678,259.

A parking lot accommodating 198 vehicles is located adjacent to Anna Brenner Meyers Hall. This lot is primarily used for staff and visitor parking during the day, with open parking during the evening hours. The campus shares a second area for student parking with the Lindsey Hopkins Technical Education Center. This lot, at Northwest 7th Avenue and Northwest 13th Street, ten blocks from the campus, holds approximately 350 vehicles, with shuttle bus service provided at fifteen minute intervals. An attendant is posted at the lot during hours of operation. This unpaved lot is in poor condition and because of its location, limits accessibility to the Campus' educational activities. It is recommended that more suitable student parking be provided within safe walking distance of the campus.

The campus is fully accessible to public transportation, including the County's new Metrorail rapid transit system. However, Medical Center Campus program students are assigned to a number of clinical facilities throughout the community for their clinical experiences, and depend upon automobile transportation to these facilities.

2. Building Utilization

When the Medical Center Campus was first conceptualized, the intent was to provide only technical program courses. However, by the time of its opening in 1977, a limited number of Arts and Sciences courses were offered by the campus in support of the Nursing and Allied Health Technologies programs. These courses, as well as developmental courses, have increased in recent years, and now account for approximately one-third of the total campus credit enrollment. The addition of these courses and their support functions, as well as a general growth in program enrollment, has resulted in overcrowded conditions. This is particularly acute in the faculty and administrative office areas and in storage space. Although the campus purchased a free-standing storage container to alleviate some of the problems, storage space is still limited. It is recommended that additional and larger faculty and administrative offices and storage space be obtained.

Because of clinic scheduling, classroom and meeting spaces are at a premium during some hours of the day. The addition of the classroom portables in 1983 and 1984 has eased some of the room scheduling problems the campus has experienced. However, their physical construction does not contribute to an atmosphere for effective learning. The number and size of classrooms are inadequate to secure the needs of the campus in relation to its stated educational programs and activities. It is recommended that additional permanent classrooms be added to the campus.

Reference 6 provides an accounting of the number of students on campus at any given hour for a typical week of the 1983-84 Winter Term. Reference 7 illustrates classroom usage during the same period of time.

3. Building Services

Maintenance at the Medical Center Campus is a dual responsibility of the campus and the College administration. The campus is responsible for general custodial services, light equipment repair work, and contractural maintenance services. The Campus Director of Educational Technologies and Campus Operations, who reports to the Dean of Administration, has direct supervision over these functions and has a staff equivalent to ten full-time custodians. Major repair jobs and overall maintenance of buildings and grounds are the responsibility of College Services.

Because of the size of the campus, the design of its main building did not include a unitized air handling central system. Instead, a high volume air conditioning (HVAC) system was installed which emits both hot and cold air, simultaneously controlled, to create desired room temperature. However, with the advent of national legislation on energy conservation, prohibiting the simultaneous use of hot and cold air, the campus has experienced severe problems maintaining comfortable and consistent room temperatures. On certain days there have been variations in temperature in excess of twenty degrees, particularly in the clinic areas. The daily on-off operations of the air-conditioning system are controlled by a Pacific Technologies, Inc. computer. Normal operation of the system is 6:00 a.m. to 10:30 p.m., Monday through Friday, and 6:30 a.m. to 4:30 p.m. on Saturday. The Dental Hygiene Clinic vacuum and air systems are operational during these same times. The inability of the system to maintain a comfortable and consistent temperature detracts from an atmosphere for effective learning. It is recommended that the existing air handling system be replaced or suitably modified.

In 1982 the College installed a Monitrol system to control all lights outside of the building.

The Medical Center Campus Security Office includes a patrol chief and a staff equivalent to ten full-time patrol officers. Training and coordination of College procedures is provided through the College Director of Security. The primary role of the Security Office staff is to safeguard all campus properties against fire, theft, vandalism, and other hazards. Additionally, they are to enforce rules and regulations intended to protect the overall safety, health, and general well-being of campus users. The Security Office is open 24 hours a day year-round.

The scope of authority and responsibility of the Security Office is limited by College policy. Patrol officers do not carry weapons or have authority to arrest or detain any individual.

The campus has developed a manual covering emergency contingencies and applicable procedures, distributed to all employees of the campus (see Reference 8).

An AT&T Dimension telephone system was installed with the construction of the campus in 1977. At that time, the system was considered modern, having all important state-of-the-art features such as automatic ring-on-busy, call transfer, and conference capability. The campus maintains 160 extension numbers, 85 direct-in-dial numbers and two SUNCOM long distance trunks.

In October 1984, the College purchased its own digital telephone system which has more call features and will greatly reduce costs in this area.

Computer services support is provided to the campus by the College. Computer processing requirements are submitted daily to the Wolfson Campus Computer Center with a one day turn-around. The College has assigned one person to the campus to facilitate this process and to assist campus users with requests for computer processing.

4. Insurance

The College is a member of the Florida Community College Risk Management Consortium, which is a self-insured, self-funding, comprehensive insurance plan. The Consortium handles the risk of loss to each participating college under the direction of its President's Council. Worker's compensation, property, medical malpractice, and comprehensive general liability coverages are provided by the Consortium program, with varying levels of deductibles at each college.

5. Inventory

Maintaining the actual physical inventory of equipment on the Medical Center Campus is a function of the College Department of Property Control. This department annually provides the campus with a computerized listing of all capital items, located on the campus, with a purchase value of $200 or more. The inventory listing includes a complete description of each item, including manufacturer, model number, vendor, acquisition date, and the accountable department. This computerized inventory system is on-line and any capital item can be located via computer terminal by entering its property control number. At least once each year the campus verifies that all equipment assigned to it exists and is located in the area designated.

6. Projections

As a result of an on-site survey conducted in December 1982 by the Florida Department of Education, the Medical Center Campus has been recommended for a Phase II expansion of its current facilities. Plans for this expansion currently call for construction of a second building, of approximately 100,000 gross square feet, and modifications to the existing facility for necessary laboratory expansion. The new building will consist primarily of additional classrooms, faculty and administrative offices, and a minimum 600-seat auditorium. Phase II expansion of the Medical Center Campus is on the College's priority listing for construction.

SUGGESTIONS FOR STANDARD EIGHT

None

RECOMMENDATIONS FOR STANDARD EIGHT

Recommendation One: More suitable student parking should be provided within safe walking distance to the campus.

Recommendation Two: Additional permanent classrooms should be added to the campus.

Recommendation Three: Additional and larger faculty and administrative offices and storage space should be obtained.

Recommendation Four: The existing air handling system should be replaced or modified.

STANDARD NINE

SPECIAL ACTIVITIES

General

Since its inception, the Medical Center Campus has been a model in innovative health-related programs for both Florida and the nation. Criteria which best describe the campus response to community needs can be derived from the primary and corollary recommendations developed by the National Commission on Allied Health Education (see Reference 1). The Commission, supported by a W.K. Kellogg grant to the American Society of Allied Health Professions, was established to investigate the development, current status, and outlook for Allied Health Education, and to make recommendations for the 1980s based on its findings. The major innovative programs described in relation to this Standard are examples illustrating how the Medical Center Campus has incorporated most of the Commission's recommendations. These include strengthening alliances in service and education, improving clinical education, building the capability for leadership and innovation, providing for effective planning and administration, and determining appropriate content and level of educational programs.

Four representative examples were selected by the campus self-study committee for evaluation in relation to this Standard. Thirteen other innovative health-related education programs and services are summarized beginning on page 9.10. Certain of these programs and services are no longer offered since they have fully satisfied the community needs for which they were developed.

NURSING EDUCATION COMMUNITY EXTENSION PROGRAM

1. Administration and Organization

The Nursing Education Community Extension Program was initiated to meet the community need to provide licensed nurses with a means to earn the 24 continuing education contact hours which they require each two years to retain certification. The administrative officer for the Nursing Education Community Extension Program is the Chairperson of Special Programs in Nursing Education. This individual reports to the Dean of Nursing Education. The Chairperson of Special Programs in Nursing Education is a member of the Nursing Executive Committee (NEC), which is the policy-making body for Nursing Education. Recommendations concerning the goals, course offerings, policies, and procedures related to community extension are made by the NEC.

The Nursing Education Advisory Committee is periodically apprised of the goals of the Community Extension Program and its immediate and long-term curriculum plans. Advisory Committee members assist in identifying the continuing nursing education needs of the community, which are reflected in course content.

The Chairperson of Special Programs in Nursing Education has the following responsibilities:

a. Articulating and updating a current philosophy of continuing education for nurses;

b. Developing and scheduling courses which address the learning needs of nurses in the Dade County area, adhere to criteria established by the Florida State Board of Nursing, and are approved by the Campus Curriculum Committee and collegewide Academic Affairs Committee;

c. Identifying, evaluating, and assigning full-time and part-time faculty members who teach community extension courses and workshops

d. Producing and distributing a brochure twice each year to inform nurses in the community regarding educational opportunities available to them;

e. Communicating with health care agency administrators regarding the learning needs of their employees and their available instructional resources, including classroom space;

f. Maintaining those student records and documents, required of all College programs by the College administration and by the Florida State Board of Nursing to maintain "provider" status.

A plan for program and course evaluation is essential for informed decision-making by the Chairperson of Special Programs in Nursing Education and the faculty (see Reference 2).

2. Financial Resources

The cost and productivity of the Nursing Education Community Extension Program is considered within the total context of the Nursing Education area. Nursing Education operates under a clearly identified budget on a fiscal year basis. The budget is administered by the Dean of Nursing Education with a specific allocation for materials and brochures. Other items, such as in- and out-of-county travel, and educational equipment and supplies, are funded through the general area budget. The needs of all programs within the area are similar, with faculty and students sharing instructional materials and equipment. Any special needs of Nursing Education Community Extension are communicated to the area staff associate or laboratory coordinator, who processes purchasing requests after priorities have been determined by the NEC.

Most Nursing Education Community Extension faculty are subject area specialists employed on a part-time basis by the College. They are paid from the campus part-time and overload budget. Adequate financial resources have always been available to compensate Nursing Education Community Extension faculty.

3. Faculty

The Nursing Education Community Extension Program consists of one full-time faculty member and approximately 28 part-time faculty, seven of whom are currently full-time faculty in the Associate Degree Nursing Program. A full-time instructional assistant is employed to correspond with, advise, and register students; maintain records; correspond with and assist faculty in preparation of instructional materials; and coordinate those activities which result in community extension participants receiving recognition for their contact hours. Clerical assistance is provided by two secretaries. Full-time faculty and staff are accorded the same recognition and benefits as other campus and College faculty and staff.

Nursing Education Community Extension faculty are selected to teach specific work-shops and/or courses because of their professional expertise and interests. Part-time faculty, whose only association with the College is the Nursing Education Community Extension assignment, have resumes on file in the office of the Chairperson of Special Programs in Nursing Education. All part-time faculty have at least a baccalaureate degree and work experience in their recognized areas of expertise. Their credentials are consistent with College criteria for employment and meet the standards established by the Florida State Board of Nursing, which is the professional accrediting body for continuing nursing education providers.

Personnel policies for part-time and full-time Nursing Education Community Extension faculty are the same as those which apply to other full- and part-time faculty employed by the College.

4. Students

The typical Nursing Education Community Extension student is a mature adult learner, currently employed in the profession of nursing, with a variety of occupational and personal commitments in addition to learning. This student frequently comes to the learning environment unfamiliar with instructional procedures, yet very much focused on specific learning needs. For example, the student population includes nurses who have been actively practicing for a number of years, inactive nurses who may wish to augment their nursing credentials, and those who are attending workshops or courses only to acquire the legally-mandated continuing education contact hours required for license renewal.

To meet the needs of these heterogeneous learners, both the instructional assistant and chairperson individually advise students, helping them to select courses and complete the application and registration process. The instructional assistant is bilingual, enhancing communication with the large number of students whose native language is Spanish. An additional service provided by the program is mail-in registration. Those individuals who find it difficult to come to the Medical Center Campus may register by mail.

To address the adult learner's need for long-range planning, the Nursing Education Community Extension Program distributes a special brochure twice a year which includes the schedule of future classes (see Reference 3). This brochure is distributed to all licensed nurses in Dade County and to out-of-county residents who have previously participated in classes or who have requested placement on a mailing list.

Nursing Education Community Extension students are entitled to the same services as other students enrolled in the College. They may enroll in developmental courses, seek advisement and counseling outside the Nursing Education area, participate in standardized testing for assessment purposes, use the Nursing Skills Laboratory for individualized learning activities, use the libraries and Learning Media Center, and participate in student activities.

CUBAN NURSE PROGRAM

1. Administration and Organization

The Cuban Nurse Program, administered by the Dean of Nursing Education, was developed in response to a need identified by the Governor of Florida in 1982. The Dean was appointed chairperson of a Blue Ribbon Panel, commissioned by the Governor, to propose equitable solutions for over 200 Cuban nurses, who were American residents prior to 1977, to be licensed as registered nurses in the State of Florida. Community extension credit courses were offered in two modes: a 34-week program, and a variable-time program. Both programs were completed in 1984. The curricula appear in Reference 4.

2. Financial Resources

The budgets for the 1983-84 and 1984-85 academic years for the two programs were included in the general budget for Nursing Education. No problems arose when these additional needs were addressed. The cost-effectiveness of the programs were subject to the same academic accountability as other programs in Nursing Education. Adequate budget was afforded for faculty, supplies, and secretarial assistance.

3. Faculty

No distinction was made between program and Community Extension faculty, which included full- and part-time faculty in both cases.

4. Students

Those enrolled in the Cuban Nurse Program were considered special students. They had to be validated by the Florida State Board of Nursing as Cuban registered nurses who had successfully passed the University of Havana licensure examination prior to June 1969. In order to ensure that only validated individuals were accepted into the program, the Dean of Nursing Education received a copy of the letter of approval that was sent to each nurse.

Sixty nurses were admitted to the variable time program each sixteen weeks. Fifty were admitted to each 34-week refresher program. One month prior to the beginning of each program, eligible nurses were invited to a program orientation which included assistance in the registration process.

When each nurse successfully met the objectives of the program, he or she was notified by mail. The final decision for licensure by endorsement was made by the Florida State Board of Nursing.

POST-REGISTERED NURSE OPPORTUNITIES

1. Administration and Organization

Post-Registered Nurse Opportunities (PRO) is a special group of services, including advisement and course offerings, within the Community Extension Nursing Program. PRO has been designed to provide assistance for registered nurses seeking the baccalaureate degree in nursing from the New York State Regents External Degree Program, through a program of assessment rather than instruction. Seven PRO courses focus on nursing content helpful to External Degree candidates (see Reference 5).

2. Financial Resources

PRO is included in the Nursing Education budget. Expenses include faculty and staff salaries and educational supplies.

3. Faculty

PRO courses are taught by either full- or part-time nursing faculty who are experts in course content. All faculty are accorded the same recognition and benefits as other faculty and must meet the same criteria for employment.

4. Students

PRO students are usually registered nurses, working full-time, who are seeking to expand their professional roles. Consequently, academic advisement is available to provide information about various baccalaureate nursing programs and their requirements. PRO courses are offered days, evenings, weekends, and on- and off-campus, as demands dictate. PRO students have the same access to support services, such as the library and Learning Media Center, as other enrolled students. Since PRO is not a program with a defined beginning or end, students need only be admitted to the College to register for a PRO course.

ALLIED HEALTH TECHNOLOGIES COMMUNITY EXTENSION

1. Administration and Organization

Community extension courses in Allied Health Technologies are offered on an as-needed basis. There are few disciplines requiring formalized continuing education in Allied Health Technologies. When community extension courses are offered, the administration of these courses is identical to generic program offerings.

The College provides a process for the approval of temporary courses. A sample of the request for course approval appears in Reference 14 under Standard Three.

2. Financial Resources

Funding for special courses is administered in the same manner as all other Campus offerings. Tuition, fees, faculty remuneration, library and audio-visual support are identical to those for program courses.

3. Faculty

No distinction is made between program and Community Extension faculty.

4. Students

The students are most often graduates of the Medical Center Campus, seeking to upgrade knowledge and skills in their disciplines.

OTHER HEALTH-RELATED PROGRAMS AND SERVICES

Florida Nursing Home Administrators "Core of Knowledge" Program

As a result of Medicare legislation which requires nursing home administrators to be licensed, the State of Florida mandated that a state licensure examination be administered in the latter part of 1972. Through a cooperative effort with the Florida Nursing Home Association and the State of Florida Board of Nursing Home Administrators, the campus developed and implemented the Florida Nursing Home Administrators "Core of Knowledge" Program, to prepare current nursing home administrators for the examination. This short, one-time program, completed in the early 1970s, was considered a success since the pass rate on the first Florida Nursing Home Administrator examination, by program participants, was high.

Practical Nursing Program

The delicate balance which must be maintained between health manpower needs and training programs can be best exemplified by the Practical Nursing Program. In 1968, the College, through a survey of hospital manpower, determined an annual need for more practical nurses than were being graduated from the two existing programs. Consequently, the College received approval from the Florida Board of Nursing in August 1969 to initiate a full-time Practical Nurse Program. The need became so great in the county-operated Jackson Memorial Hospital that an in-agency part-time Practical Nurse Program was added by the College in January 1970. The part-time program was discontinued in December 1976 as the need diminished. Ultimately, changing staffing patterns resulted in the closing of the full-time program as well. Since 1981, community needs for licensed practical nurses is being met by the Lindsey Hopkins Technical Education Center.

Special Radiologic Technology Program

In January 1973, the Medical Center Campus inaugurated a program whereby a graduate from an approved hospital school of radiologic technology, currently certified by the American Registry of Radiologic Technologists, is awarded college credit for the hospital training upon successful completion of a special advanced course at the College. Further, upon completion of certain general education courses, the student is awarded an Associate in Science degree.

Awarding of Associate Degree to Hospital-Based Diploma Nursing Graduates

Since 1974, Miami-Dade Community College has awarded graduates of the diploma program of Jackson Memorial Hospital School of Nursing college credit for their nursing courses, leading to an Associate in Science degree, providing additional requirements of the College are met.

Special Associate Degree Nursing Program for Physicians Assistants

A one-time program was offered by the campus in 1974 that permitted baccalaureate-trained physicians' assistants, who were also active duty Air Force personnel, to become Associate Degree Nurses. As nurses, they would be eligible for officer commissions in the Air Force.

Program for Cuban Nurses In Spanish

In 1975, for a short period, the regulations of the Florida Board of Nursing were changed to allow foreign nurses to take the Florida Nursing Licensure Examination in their own languages. A program was developed to teach Cuban nurses, who were not licensed in Florida, in Spanish. Of the approximately fifty students who completed this program, 97% passed the state licensure examination in Spanish. This program was discontinued in 1976.

Program for Spanish-Speaking Medical Laboratory Personnel in Spanish

In 1978, bilingual medical technologists and pathologists were recruited from the community to teach classes in all basic clinical laboratory disciplines, to prepare Spanish-speaking students for the Florida licensure examination. Concurrently, students were encouraged to enroll in English as a second language courses, since the licensure examination is in English. The program was discontinued in 1981, having met the students' needs.

Partnership Program

In 1978, hospitals in the Fort Myers, Florida community were experiencing difficulties in recruiting and retaining Board certified respiratory therapy technicians. The local community college, Edison Community College, entered into a partnership agreement with Miami-Dade whereby the former would offer general education and required science courses, and the Medical Center Campus would be responsible for respiratory therapy courses. Between 1980 and 1982, more than thirty students received Planned Certificates as Respiratory Therapy Technicians from Miami-Dade.

Ophthalmic Assistant Special Program

In response to requests from the ophthalmological community for a program to upgrade their ancillary personnel, an evening program was established which was completed by fifty students during 1980 and 1981. The campus provided the didactic portion and the sponsoring ophthalmologists provided the necessary clinical experiences. These students became eligible for the Ophthalmic Medical Assistant National Certification Examination.

Associate Degree Nursing Accelerated Option Program

The Accelerated Option Associate Degree Nursing Program was developed to accommodate college graduates, baccalaureate or higher, who desire career changes in a short period of time. The program enables the student to earn an Associate in Science degree in nursing in one calendar year rather than two. The philosophy and terminal objectives of the program are the same as those for other Associate Degree Nursing options offered by the campus.

Alliance for Employee Advancement Delivery System

The Alliance for Employee Advancement delivery system offered by the Medical Center Campus was implemented to be more responsive to the hospital industry. Through well-coordinated planning among geographically aligned hospitals, the campus provides instruction as well as College admission and registration services at the hospitals for programs ordinarily offered only at the campus facility. The service takes into account the working hours of the students so that they can maintain full-time employment status. Since the service was first offered in Septmber 1981, four "clusters" of hospitals have been involved. The first group of students graduated from the Associate Degree Nursing Transitional Program in December 1984, having taken all classes on location at Baptist Hospital. This program is the subject of a more detailed, evaluative report beginning on page 12.1.

Reverse Alliance for Employee Advancement

There is a need within the hospitals of South Florida for small numbers of specialty allied health personnel. The number required can not support a full-time on-campus program. As a result, the Medical Center Campus initiated a "Reverse" Alliance for Employment Advancement delivery system in March 1984. Under this concept, the campus evaluates and assigns appropriate college-level credits to hospital training programs. By taking additional courses at the College, the student can receive a Planned Certificate or Associate in Science degree. The first program, Pharmacy Technician Planned Certificate, was jointly established in October 1984 with Mount Sinai Medical Center of Greater Miami.

Vocational School to College Health Career Opportunities

The close proximity of the Lindsey Hopkins Technical Education Center to the Medical Center Campus offers unique possibilities for articulation. A program developed jointly by the Center and the campus, for implementation in 1985, is in the field of dental technology. Upon completion of the Lindsey Hopkins Dental Technology Program, graduates will receive College credits for this training after further completing an advanced dental technology course and general education courses offered by the campus. Successful completion of all required coursework leads to an Associate in Science degree.

Projections for Standard Nine

No changes are projected in the Medical Center Campus pattern of being responsive to community needs for the education of health-related personnel.

SUGGESTIONS AND RECOMMENDATIONS FOR STANDARD NINE

None

PLANNING FOR THE FUTURE

There are three central factors that dominate planning for the future at Medical Center Campus. The first of these, which emerged most frequently in gathering data for this self-study, concerns the need for more space. The addition of classroom and office space, and the expansion of library facilities, are considered priority issues by faculty, administration, and staff. Parking space, more convenient to the campus, is a priority for students. Campus personnel have devoted great attention to activities to meet these needs. These include the acquisition of land, development of plans for new facilities and renovation of the current building, and enlisting support for these projects.

The issue of support leads to a second factor influencing planning and projection. As a state-supported institution, Miami-Dade depends upon the State Legislature and governance structure to provide funding. Governmental influence is therefore a highly significant factor. This influence extends beyond fiscal issues and plays a key role in other aspects of academic planning. The state-mandated examinations for entering and graduating students, and the writing requirement in the core curriculum, are recent examples of impact on academic planning. As such issues often develop rapidly and unexpectedly, long-range planning is difficult.

The third major influence on planning is the health care industry. Major changes in health care delivery systems have the potential to create changes in programming at Medical Center Campus. It is still too early to assess the total impact of recent changes on the industry, or on the campus, but members of the administration and faculty are using their state and national contacts to keep informed. Program advisory committees and the Campus Advisory panel will participate in this information network.

The Medical Center Campus will continue to cope with changing needs and directions as it has since its inception, offering program and delivery systems which have kept pace with or anticipated national trends.

RECAPITULATION OF MODIFIED SACS STANDARDS STUDY SUGGESTIONS AND RECOMMENDATIONS

Standard One. Purpose

SUGGESTIONS: None

RECOMMENDATIONS: None

Standard Two. Organization and Administration

SUGGESTION

Suggestion One: A more formal structure should be developed to provide backup for support personnel.

RECOMMENDATIONS: None

Standard Three. Educational Program

SUGGESTIONS

Suggestion One: More institutional and campus support should be obtained to provide effective and secure testing conditions in the Learning Media Center.

Suggestion Two: Additional microcomputers should be provided to permit a higher percentage of students to complete independent instructional activities.

Suggestion Three: Additional professional staffing should be provided for faculty/student support in the college-wide effort to improve reading and writing across the curriculum.

RECOMMENDATIONS

Recommendation One: Larger and more secure office space should be obtained for all faculty.

Recommendation Two: Additional classrooms, laboratories, and office space should be obtained for the Department of Arts and Science.

Recommendation Three: There should be more support for security in the Learning Media Center.

Recommendation Four: The Department of Arts and Sciences should review the process for requesting the purchase of new books and periodicals with the Library staff.

Standard IV: Financial Resources

SUGGESTIONS: None

RECOMMENDATIONS: None

Standard V: Faculty

SUGGESTIONS: None

RECOMMENDATIONS

Recommendation One: As the Faculty Handbook is an important resource document for faculty, it should be updated.

Recommendation Two: The procedure used for evaluation of part-time faculty members should be standardized.

Standard VI: Library

SUGGESTIONS

Suggestion One: Funds should be provided for the campus audio-visual equipment replacement plan.

Suggestion Two: Funds should be provided to upgrade campus television studio equipment for videotape recording and editing.

Suggestion Three: The campus library should receive funding to replace the old security system.

Suggestion Four: The campus library should be supported in its efforts to add access to on-line data bases as one of its services.

Suggestion Five: The campus library should have an additional librarian.

RECOMMENDATIONS

Recommendation One: The campus library should be significantly expanded in both shelving and seating capacity.

Recommendation Two: The process by which the Council of Campus Managers serves as the campus library advisory committee should be formalized.

Standard VII: Student Development

SUGGESTIONS: None

RECOMMENDATIONS

Recommendation One: Construction of an auditorium with a seating capacity of at least 600 and facilities for stage seating and at least minimal production should be considered in plans for additional campus facilities.

Recommendation Two: The Medical Center Campus should review its counseling services on the basis of need, referral process and level of support.

Standard VIII: Physical Resources

SUGGESTIONS: None

RECOMMENDATIONS

Recommendation One: More suitable student parking should be provided within safe walking distance of the campus.

Recommendation Two: Additional permanent classrooms should be added to the campus.

Recommendation Three: Additional and larger faculty and administrative offices and storage space should be obtained.

Recommendation Four: The existing air handling system should be replaced or suitably modified.

Standard IX: Special Activities

SUGGESTIONS: None

RECOMMENDATIONS: None

EVALUATION OF THE ALLIANCE FOR EMPLOYEE ADVANCEMENT SYSTEM

ABSTRACT

Miami-Dade Community College has a continuing commitment to provide quality educational services that meet the needs of the community. These needs include not only the subject matter of academic courses but facilities and schedules for course offerings. The Medical Center Campus, in cooperation with health care agencies of Dade County, meets this commitment by offering off-campus courses for health care occupation students in a program called the Alliance for Employee Advancement System. This program permits hospital employees to attend classes in their places of employment, or hospitals in the same geographic area, at times convenient to their schedules as full-time employees.

This study examines the Alliance System to determine whether the campus is fulfilling its commitment to provide these educational opportunities to hospital employees. This self-examination was based upon research survey responses from five subgroups of 245 individuals who participate in the Alliance System: students, faculty, hospital education directors and administrators, and campus staff.

The survey results indicate that the Alliance System is meeting the educational needs of the community and should be continued. The results also revealed need to review all aspects of communications to hospital employees regarding educational opportunities available through the Alliance System.

The study recommendations include continuation of the Alliance System, provision of more information about the System to the hospital employees, and completion of a health care community educational needs assessment. December 1986 is the projected date for completing a study of the System and the health care community needs assessment. February, 1987 is projected as the date for completing a five year educational plan to be reviewed by the health care community.

1. History and Description

In the Miami-Dade 1974 Institutional Self-Study, one recommendation was that "...all departments of the College should be encouraged to assess their own areas and disciplines in terms of what they can offer to the community beyond the traditional modes of higher education..." (see Reference 1). The College Catalog also lists meeting the educational needs of the community as one of its mission statements (see Reference 2). In meeting these needs, the Medical Center Campus began investigating ways of reorganizing the occupational programs to be more responsive to the residents of the community. During the fall of 1980, individual meetings were held with approximately 30 Dade County hospital administrators to ascertain which educational needs were not being met. The concept of the Alliance System was first discussed at those meetings, and the resulting ideas were presented at the next annual meeting of the Medical Center Campus Advisory Panel. The Panel endorsed and encouraged the implementation of the Alliance System.

On the recommendation of the Panel, a meeting was held during the latter part of March 1981 at the Medical Center Campus with hospital administrators and representatives of the South Florida Hospital Association to explore ways in which the campus could provide on-site educational services for the health care agencies. This educational delivery system would provide on-site educational opportunities for employees who wished to pursue one of the health care programs offered by Medical Center Campus. It focused on adult learners who were constrained from attending on-campus classes due to job or family responsibilities. The courses would be scheduled at convenient times for employees and were to be taught by the same faculty that taught on-campus classes.

As a result of these preliminary discussions, the Alliance for Employee Advancement System was initiated in 1981. The campus' role was to provide on-site orientation to the Alliance System for hospital employees, in addition to all intake services. These services included processing applications for admission to the college, testing basic skills, advisement, course selection, registration and payment. At the on-site orientation sessions, college staff describe Medical Center Campus programs and admission requirements and determine specific course needs of the prospective students.

The health care agency role was to identify a coordinator who would assist the campus in conducting educational surveys, scheduling space for orientation sessions, administering basic skills assessment, and completing intake processing. The coordinator would also notify employees of orientation sessions, courses offered through the Alliance System, and tuition reimbursement policies of the agency.

Three major health care agencies located on Miami Beach were the first group to respond to the Alliance System. A joint survey was conducted by St. Francis Hospital, Miami Heart Institute, and Mount Sinai Medical Center to determine employee interest in the Alliance System. The campus staff scheduled follow-up orientation sessions immediately, completed the necessary intake services, and started the first classes with the opening of Fall Term 1981 at the three hospitals. Subsequently 23 other local health care agencies have participated in the program. Courses are offered at eight to ten hospitals each term. Employees of other nearby hospitals also enroll in these courses.

As of Fall Term 1984, eight health care facilities and more than 250 students enrolled in 829 credits of coursework are participating in the Alliance System. These figures compare favorably with the average of 220 students and 860 credits per term since 1981.

2. Evaluation Objectives

As part of the Miami-Dade 1984 Institutional Self-Study, in addition to evaluating the College's educational reforms, each campus examined one or more programs which employ special campus capabilities or meet special needs of its students or service area. The Medical Center Campus chose to assess its Alliance for Employee Advancement System. Study of this system focused upon evaluation of its success in providing educational services to the local health care community. No formal research had been conducted to determine whether the goals and objectives projected for the Alliance System were being met. The intensive examination of this educational delivery system provided evaluative information as well as data for projection of future educational needs of the health care community. This information will prove beneficial to the Medical Center Campus in charting new directions for the program itself and in illuminating effective strategies for developing additional community linkages for the campus and the College.

In order to formulate the objectives to be studied, a review was conducted of all of the available documentation on the Alliance System. This documentation included the recommendations from the College's 1974 self-study, pertinent minutes of the District Board of Trustees (see Reference 3), and the records of Alliance System activities. Medical Center Campus personnel who had been actively involved in the System were interviewed to identify research questions and unresolved problems.

Two main study objectives emerged. These related directly to the value and quality of the Alliance System. A third was to determine whether the health care community needs these educational services, with possible expansion over the next five years.

The study was designed to determine whether the health care community wishes to have the Alliance System continue. Research surveys contained specific response items on this point. These items addressed such areas as employee retention and promotion, benefits of the System in relation to resources expended, and extent to which the system was meeting the employees' educational needs. The central issue of the System's value to the health care community provides the basic framework necessary for continuing the System, as well as validating that it is meeting community service goals established by the College.

The study also provided opportunity to examine the quality of the Alliance System in respect to its educational services. Survey items dealt with how well the intake services and course scheduling were provided and communicated to those involved. The survey responses provided insight into which aspects of the delivery system were working well.

The final issue of the study centered on the health care community's need to continue the program. The positive response to continue the program with more services sets the stage for developing a plan for the Alliance System for the next five years.

3. Research Design

Survey instruments were developed for the purpose of assessing the perceptions of the health care industry and its employees, Alliance System students, and Medical Center Campus faculty and staff, regarding the effectiveness of the

Alliance System in meeting its objectives. Surveys consisted primarily of forced-choice, agree/disagree items, to standardize responses, minimize time required for completion, and facilitate administration of surveys and tabulation of results. Because the survey forms were easy to complete, higher return rates resulted. The self-report instruments provided anonymity and focused only upon issues revelant to the evaluation objectives. Demographic items were included for ease of cross-tabulation. Open-ended items provided respondents the opportunity to comment on the Alliance System. The campus-wide self-study committee and a research associate from the Office of Institutional Research served as resources for improvement of the survey instruments, as did the College Self-Study Coordination Committee, which reviewed all survey instruments for content and form.

The target groups identified involved a wide range of persons knowledgeable about the Alliance System. These included five subgroups: executive directors of health care agencies participating in the Alliance; education directors of these agencies; and Alliance System students, faculty, and campus staff. Survey instruments were developed for each subgroup, so that only relevant issues were addressed to each. References 4-8 include these instruments and the data obtained. A pilot study was conducted to identify and correct flaws in the survey forms. The surveys included 100% of all Alliance System participants, to increase return rates and improve the representativeness of results.

Survey results were tabulated separately for each subgroup and included frequencies of responses to each item.

Since the two major research goals of the study were to examine the value of the Alliance System to the community and the quality of its delivery system, analysis and interpretation of results are reported in terms of these goals. In addition, the survey was used to assess projected education needs of the health care agencies.

4. Research Results

Survey Return Rate

The research results are reported in terms of the value of the Alliance System to the community and the quality of its delivery system. Table 1 presents the survey return rates by subgroup. In each of the five target groups, the number of surveys sent represent 100% of the target population. References 4-8 summarize results for the five subgroups on the respective surveys.

Table 1

Alliance System Survey Return Rates

TARGET GROUPS	SURVEYS SENT	SURVEYS RETURNED	PERCENT RETURNED
Executive Directors	15	9	60
Education Directors	17	9	53
Alliance System Students	220	207	94
Faculty	16	16	100
Campus Staff	4	4	100
TOTAL	272	245	90

Value of the Alliance Delivery System

The following research results are reported according to the value of the System to each of the five subgroups sampled. All but one of the 245 respondents agreed that the Alliance System should be continued. Nearly two-thirds (64.8%) of the students indicated that courses offered at their health care agencies were meeting their interests, and over three-fourths (77.7%) of the education directors concurred. Almost all of the students (94.7%) reported that the System was helping them to continue their education, which would have been difficult otherwise. More than three-fourths (77.8%) of the executive directors agreed that the System was reducing employee attrition rates at their health care agencies, and two-thirds (66.7%) of the education directors agreed. Over half (55.6%) of the executive directors indicated that the System was helping their agencies to maintain a surplus of qualified personnel.

Slightly more than half (51.5%) of the students indicated that they were not likely to be promoted as a result of completing an Alliance course. However, 50.7% of the students indicated that they would probably receive a pay raise as a result of this educational advancement. One-third of the education directors indicated that completion of the Alliance courses had resulted in employee promotions, one-third disagreed, and one-third did not know.

Most of the executive directors (88.9%) reported that their agencies offered tuition reimbursement to their employees, and that any reduction in federal funds to their agencies would not limit their abilities to continue offering this benefit to employees. Seven out of ten students (70.1%) were aware of the financial aid possibilities offered by their places of employment. Over one-third of the students (38.4%) participated in the tuition reimbursement programs sponsored by their employers.

All of the Medical Center Campus staff, the executive directors, and 88.9% of the education directors indicated that the benefits of the Alliance System justified required resources. The responses to survey items related to the value of the System were positive and recommended that it be continued.

Quality of The Alliance Delivery System

In regard to awareness of the Alliance System by hospital employees, over half (55.5%) of the education directors indicated that their employees were aware of the System and its opportunities for their educational and professional advancement. Prior to the orientation sessions included in the program, less than one-fourth (22.2%) of the education directors and 50.0% of the campus staff reported that hospital employees were usually familiar with the System.

All education directors were content with the advance notices they received concerning courses to be held at their facilities each term. Regarding notification of class times, days, and locations, over half of the students (55.5%) indicated that they had received advance notification of any changes. Most faculty (81.3%) and education directors (88.9%) agreed that room assignments were made and students informed prior to the first class sessions. Less than half of the education directors (45.5%) felt that there were occasional time, place, or day changes for courses prior to initial class sessions.

Regarding Alliance courses offered at other local health care agencies, 60.0% of students indicated that receiving such information would be helpful.

While all of the campus staff who responded to the surveys reported that health care agencies were informed in advance of the dates and times that campus personnel would be coming to their facilities, 88.9% of education directors indicated that the advance notifications were satisfactory, and 70.4% of students reported receiving advance notices. However, half (50.0%) of the staff respondents noted that students were not informed in advance by health care agency education directors. Over four-fifths (82.3%) of the students stated that they were familiar with the registration and payment procedures when they registered for Alliance System courses, and 84.5% knew what was expected of them to gain admission to the College.

All campus staff respondents reported that Alliance students were advised to enroll in courses based on program requirements, and over three-fourths (78.1%) of students responded that they were correctly advised to take appropriate courses for their programs of interest. Two-thirds (66.7%) of education directors and 81.4% of students noted that Alliance System students were informed of requirements necessary to complete specific programs. Nearly half (46.6%) of the students agreed that they were told they would need to take certain courses at the Medical Center Campus in order to complete their programs of interest. Over half (54.7%) of the students, and all of the staff, agreed that Alliance students were told about programs offered at the Medical Center Campus when they registered for System courses.

Several of the survey responses related to basic skills testing were difficult to interpret and require further investigation. For example, two of the four campus staff members responding to the survey indicated that the testing procedures and policies were different for Alliance System students than for other campus students. The question was too general for the responses to be definitive, and need for further review of the specific testing procedures and policies is evident. Two-thirds (66.6%) of the 207 students indicated that they were tested on basic skills, 12 (8.7%) scoring below the cutoff. It is unclear whether these scored below the cutoffs on one or more of the three basic skill subtests (reading, written expression, and computation). Eleven of the 12 indicated that they were permitted to register for the courses they wanted. The relationship between the students' low test score(s) and the course(s) in which they were permitted to enroll also warrants further inqury. Eight of the twelve students indicated belief that they would have done better in their courses if they had first taken a more basic course to improve their skills in the areas in which they had low test scores.

Nearly three-fourths (73.3%) of the students noted that they had no difficulties with admission procedures. Registration for Alliance System courses was generally not identified as a problem, although 12.7% of the students reported having some problems registering at their health care agencies.

Most students (93.4%), and over two-thirds of the faculty (68.8%), agreed that students were permitted to register for Alliance courses at the first class sessions, but over two-thirds (67.9%) of the students disageed that registration procedures consumed excessive class time. Further, one-quarter (25.1%) of the faculty noted that they did not have enough information to assist students with registration problems. Three-fourths of the faculty (75.0%) agreed that more developmental courses should be offered at the hospitals so that students with basic skills deficiencies can improve their abilities. Most of the faculty (87.6%) indicated that the quality of their Alliance System courses was comparable to that of the same courses they taught on campus. The issue of course quality requires further study, since quality also relates to course objectives, audio-visual support, space, instructional materials, and the like. However, most students (86.9%) were satisfied with the quality of Alliance System courses.

With regard to the textbook distribution, only half of the faculty (50%) and campus staff (50%), and two-thirds of the education directors (66.7%), indicated that the system ran smoothly, while 84.2% students reported having no difficulty obtaining course textbooks or materials. Further, over three-fourths (78.2%) of the students responding to the surveys disagreed that delays in obtaining classroom materials caused them to fall behind in their Alliance coursework. All of the education directors noted that the System operated efficiently in their hospitals, and 88.9% agreed that the campus accommodated requests for specific courses or faculty.

When asked about projected educational needs, the majority of executive directors (88.9%) indicated that they would require more assistance from the campus in the next five years.

Three of the five subgroups (faculty, executive directors and education directors) responded to how the College could improve the Alliance System. Their verbatim comments follow. Although responses related to the quality of the Alliance System were favorable, the desirability of a more comprehensive examination of the System is evident from these comments.

Improvements Suggested by Faculty

- Communication.
- Information mailed out in paychecks as they do at Jackson for dissemination of information about classes, registration etc.
- Develop a standard form that when filled out by the students, it would satisfy registration problems. This would keep the instructors from running the paperwork back and forth through the

Registrar's and Bursar's offices.

- A.V. aids, such as slides, movies, videos are a problem if the teacher must transport them.
- Several centers should be established (e.g., deep south, mid-, and north) where courses could be attended by students from several hospitals and there would thus be enough students to fill classes. Also, a planned program should exist in every area so that students could expect to complete their program in a given period of years and get all the general ed requirements.
- More effectively address hospital education directors and assume a larger role in in-service education.
- Have a designated person take care of registration and book sales, but not a faculty person or chairperson.

Improvements Suggested by Hospital Executive Directors

- We are currently exploring ways to utilize the Alliance concept to offer continuing education and community education and community health programs.

Improvements Suggested by Hospital Education Directors

- A representative from the College to interface with individual health care agencies facilitates open communication.
- Instructors should meet personally with liaison person in the hospitals before classes begin.

- Each instructor should have an orientation to the hospital and its resources. Also, instructors should realize they are guests of the hospital and should make certain concessions and be flexible if the hospital cannot provide certain services.
- Further development of the cluster concept to increase the base from which students may be drawn so as to insure "making" a class.

5. Recommendations

The recommendations listed below are keyed to the main study objectives, which relate to the value, quality, and future needs of the Alliance System. Each recommendation reflects study findings.

Recommendation One. The Medical Center Campus Alliance for Employee Advancement System should be continued.

The results of the surveys from the five subgroups involved in the program indicated overwhelmingly that the members of the health care community value the Alliance System and wish to have it continue. Significant numbers of all subgroups felt that the benefits of the System justify the resources required for its operation.

Recommendation Two. Greater efforts need to be made to provide consistent and accurate information about the Alliance System on a term-by-term basis to each group--faculty, students, hospital education directors, and intake service personnel--involved in the Alliance System.

Based on comments from students, faculty, staff, and the education directors, the level of communication is acceptable. However, this is an area too important to be overlooked or allowed to decline if success of the Alliance System is to continue. Current and potential students need descriptions of College and program academic expectations, admissions requirements, registration procedures, and courses offered at other agencies.

Recommendation Three. An educational needs assessment should be conducted in the health care agencies to identify the educational needs of the agencies and their personnel.

A large majority of the executive directors (88.9%) indicated that their health care agencies would require more assistance from the College over the next five years. Results of a needs assessment would set the pattern for services required by agency management and employees, and would allow the College time to plan such services.

6. Projections and Plans

The Medical Center Campus projects the following measures for implementation of the foregoing recommendations.

a. A complete review of all aspects of the Alliance System will be conducted by a committee comprised of education directors, current students, staff, and faculty, for the purpose of developing further recommendations for improvement of the System. This review will be completed by December 1986.

b. An educational needs assessment will be conducted at the health care agencies participating in the Alliance System to project educational services to be provided by the College. This assessment will be completed and a design for projected services prepared by December 1986.

c. Continued efforts will be made to inform all health care agencies in Dade County about the educational services available through the Alliance. Formal presentations to the health care administrators and education directors will be made by February of 1987. The presentation will include a review of Alliance System activities since 1981, results of the needs assessment, and review of the recommendations for improving the System. An educational plan for the next five years, utilizing input from the participants, will be completed by the Spring of 1987.

SUMMARY

This volume of the final report to the Southern Association of College and Schools on the Miami-Dade 1984 Institutional Self-Study is the Medical Center Campus contribution to that activity. Its two reports comprise a current status report of the campus by demonstrating compliance with the modified nine Standards of the Southern Association and by offering a detailed evaluation of a representative, on-going campus program chosen from those identified in Standard Nine, Special Activities.

The central theme which appears in both studies is the close working relationship of the campus with the community. For the purposes of these studies, the community includes students, graduates, employers, health care providers, and professional societies and organizations. The relationships between the campus and community are maintained through advisory committees and panels, graduate follow-ups, community needs surveys, and other mechanisms designed to maintain an exchange of information. As a result of these relationships, programming in health care occupations continues to be current and relevant.

The first study provided opportunity for the campus to evaluate its progress in terms of Southern Association Standards. Campus personnel performed a thorough evaluation of campus programs and services. While the outcome was generally favorable, areas that merit further development are identified in the study suggestions and recommendations, giving faculty and staff a focus for future activities. The Council of Campus Managers, which also served as the Steering Committee for the campus self-studies, will be responsible for developing and implementing an action plan based on the recommendations. The impact on agencies external to the campus and the College will be considered when developing the plan.

The second study provided opportunity to evaluate one representative example of campus responses to community needs. The Alliance for Employee Advancement System is a cooperative effort between the Medical Center Campus and the health care agencies in Dade County to provide on-site educational opportunities for the health care employees. The first Alliance courses were offered at the hospitals in the fall of 1981. The system was initiated as a result of 1974 self-study commitments to improve the delivery of educational services to the community and of a 1981 meeting with hospital administrators in which it was formulated.

The Alliance System currently provides services to approximately 250 students each term, at eight to ten local hospitals. Each hospital serves as an educational site for employees from several nearby hospitals. On-site services include advisement, testing, admission, and registration. The courses offered at the hospital are the same as those scheduled on campus.

The two major evaluation objectives of the study were to examine the value of the Alliance System to the health care community and the quality of its delivery system. The results of this evaluation indicated that the Alliance is of value to the health care community and that respondents wish the system continued. All of the health care agency executive directors indicated that the benefits of the system justify the resources contributed by their facilities. These resources include tuition reimbursement, space, audio-visual support, and staff time.

The quality of the Alliance System was highly rated by all respondents. However, there is a need to continue to improve the delivery system in dissemination of information on College academic expectations, and in intake services such as testing, admissions, registration, financial aid, and advisement.

Based on these recommendations, a needs assessment and a review of the entire Alliance System will be completed in December 1986. Results of the needs assessment, recommendations from review of the system, and a report on its performance since 1981 will be presented at a meeting with the health care agency executive and education directors in February 1987. The primary purpose of the meeting will be to examine the status of the Alliance System and to identify the agencies' educational needs over the next five years.

The results of these self-evaluations have provided valuable feedback for campus personnel. Many perceptions that programming and services were appropriate, relevant, and meeting community needs were verified. Those areas in need of further attention were identified and will become the basis for future planning.

ANNOTATED REFERENCE LIST

Each of the items in this annotated reference list will be available in a special reference file for the Southern Association of College and Schools Visiting Committee. Those items in which no dates are indicated are the most current reference in use as of the 1984-85 winter term.

INTRODUCTION

1. The Commission on Colleges. Southern Association of Colleges and Schools. (December 14, 1977). *Standards of the College Delegate Assembly*. Atlanta, GA: Published by the Southern Association.

   This manual describes the principles and philosophy of the College Delegate Assembly in accreditation of colleges and schools as well as the statement of principles for each of the eleven Standards, two of which do not apply to Miami-Dade Community College.

2. Southern Association of Colleges and Schools. (1977). *Manual for the Institutional Self-Study Program of the Commission on Colleges, Southern Association of Colleges and Schools*. Atlanta, GA: Published by the Southern Association.

   The manual is primarily intended for member institutions engaged in reaffirmation of accreditation to assist these institutions in a self-study and as an aid in preparation for the site team evaluation.

3. Medical Center Campus. (August 1983). *Medical Center Campus In-House Self-Study Manual for SACS Reaffirmation of Accreditation*. Miami-Dade Community College, Medical Center Campus.

   This 245-page manual was prepared to assist Medical Center Campus personnel in developing a campus modified SACS Standards self-study.

4. Miami-Dade Community College. (1974). *Self-Study, Recommendations and Summary* (Vol. 1, pp. 86-97). Miami, FL: Published by the College.

   This volume, the first of nine volumes, summarizes the 336 recommendations developed in the 1974 college-wide institutional self-study.

5. Miami-Dade Community College. (1983-85). 1983-85 Catalog (Vol. XXI, p. 7). Miami, FL: Published by the College.

   This page lists the 12 fundamental College goals.

6. District Board of Trustees. (April 29, 1980). Adoption of College Goals for 1980-81. District Board of Trustees Agenda Book (Agenda Item Number II D-1a, p. 59). Miami, FL: Miami-Dade Community College.

   Forty-two 1980-81 goals of the College, classified within 12 issues, are listed.

STANDARD ONE

1. District Board of Trustees. (July 19, 1972). Planning for the Medical Center Campus. District Board of Trustees Agenda Book (Agenda Item Number V A-11, p. 108). Miami, FL: Miami-Dade Community College.

   District Board of Trustees. (February 7, 1973). Planning of the Medical Center Campus. District Board of Trustees Agenda Book (Agenda Item Number IV A-6, p. 48). Miami, FL: Miami-Dade Community College.

   District Board of Trustees. (May 13, 1974). Appointment of Elizabeth J. Lundgren as Vice President of the Medical Center Campus. District Board of Trustees Agenda Book (Agenda Item Number IV A-3, p. 61). Miami, FL: Miami-Dade Community College.

   These three foregoing Board items outline the need for construction of a separate campus to be designated as the Medical Center Campus and the appointment of a campus vice president.

2. Lundgren, Elizabeth J. (1975). Planning an Organizational Structure for the Medical Center Campus with Program Linkage Illustrated in Nursing Education. Unpublished doctoral dissertation. Nova University, Fort Lauderdale, Florida.

   This dissertation focuses on analyzing the functions of the Medical Center Campus, developing a management system including an administrative structure for the campus management team, and designing a model linkage through curriculum using nursing education.

3. Medical Center Campus. (1981 through 1985). Medical Center Campus Advisory Panel Handbook (Vols. 1-5). Miami, FL: Miami-Dade Community College, Medical Center Campus.

These annual volumes, published during the Winter Term of each year, starting with 1981, contain major documents and yearly summaries of Medical Center Campus activities.

4. Statutory Revision Division of the Joint Legislative Management Committee. (1985). Florida Statutes (Chapters 240.305, 240.307, 240.309, and 240.311). Tallahassee, FL: State of Florida.

   This statute establishes the State Board of Community Colleges and designates the appointment and qualifications of members, the organization, and the powers and duties of the Board.

STANDARD TWO

1. Program Advisory Committee Member Listing.

   This reference lists the 1984-85 membership for each of the twelve program advisory committees and the organization each member represents.

2. State of Florida Department of Education. (March 1982). Vocational Education Advisory Committees, An Organization and Function Handbook. Tallahassee, FL: Published by the Department of Education.

   Miami-Dade Community College. Advisory Committee Handbook. Miami, FL: Published by the College.

   Both handbooks are distributed to all new members of Medical Center Campus program advisory committees. The documents describe the organization and utilization of advisory committees, procedures for member selection and terms of office, responsibilities of College representatives, and follow-up of meetings.

3. Program Advisory Committee Minutes.

   The minutes of meetings of all advisory committees are on file with the respective department chairperson, the office of the campus vice president, and District Office of Occupational Education.

4. Campus Advisory Panel Member Listing.

   This listing includes all members of the 1985 Campus

Advisory Panel, their addresses, and their area of expertise.

5. Miami-Dade Community College. Policy Manual. Miami, FL: Published by the College.

   The Policy Manual for the College, which is kept current through continuous revisions, consists of the following sections:

   I Administration and Management
   II Personnel
   III Financial Management
   IV Student Personnel and Services
   V Buildings, Grounds, and Utilities
   VI Contracts and Purchasing
   VII Instructional Resources - Media, Systems, Programs, and Equipment
   VIII Instructional and Curriculum
   IX Campus Libraries and Services
   X Index

6. Miami-Dade Community College. Procedures Manual (Vols. 1 and 2). Miami, FL: Published by the College.

   These volumes contain collegewide procedures derived from the respective College policies.

7. Composition of the Campus Executive Committee.

   This listing includes the composition of the eight-member Campus Executive Committee and the names of the individuals currently in each position.

8. Composition of the Council of Campus Managers.

   This listing contains the composition of the Council of Campus Managers and the names of the individuals currently in each position.

9. Organization Structure of the Academic Deans Area.

   The organization structures for the Allied Health Technologies, Nursing Education, and Student and Instructional Support Services areas are included.

10. Composition of the Council of Chairpersons.

This listing identifies the departments and the names of the departmental chairpersons.

11. Medical Center Campus Rules and Responsibilities Guide (MRG) for Selected Areas.

    Included is a description of the campuswide on-going process for defining the campus responsibility for each individual and the most current MRGs for the Campus Executive Committee, the Allied Health Technologies, Nursing Education, and Student and Instructional Support Services areas.

12. Miami-Dade Community College Personnel Department. Classification and Pay Manual. Miami, FL: Published by the Personnel Department.

    This manual contains the title, description and minimum qualifications of all administrative and classified staff positions at the College.

STANDARD THREE

1. Miami-Dade Community College. (1983-85). 1983-85 Catalog (Vol. XXI, pp. 15-27). Miami, FL: Published by the College.

    This section of the College Catalog outlines the procedure for admission to the College.

2. College and Program Application Forms.

    This reference includes the two following applicaton forms:

    Application for Admission or Readmission
    to College Credit Courses and Programs

    Application for Program Selection

3. Miami-Dade Community College. (1983-85). 1983-85 Catalog (Vol. XXI, pp. 78-9). Miami, FL: Published by the College.

    Selection requirements for all allied health and nursing programs are listed.

4. Miami-Dade Community College. (1983-85). 1983-85 Catalog (Vol. XXI, pp. 16, 22-24). Miami, FL: Published by the College.

   This section of the College Catalog provides an explanation of the College policy for awarding credits to transfer students and through other options such as Advanced Placement Prgram, CLEP, credit by examination, and credit for demonstrated prior learning.

5. Program Selection Documents.

   This set of documents from the respective Medical Center Campus programs includes selection criteria, selection criteria worksheets, selection procedures, and sample student notification documents.

6. Program Packets Sent To Potential Applicants.

   Each of these packets, from each Medical Center Campus program, contains all the necessary information to assist a potential student in applying to the program.

7. Recruitment Visitations.

   This reference lists the date and place of recruitment visitations by faculty and staff since the academic year 1981-82.

8. Brochures.

   Included in this reference are the two Medical Center Campus general brochures, ten individual program brochures and examples of collegewide brochures which apply to the Medical Center Campus.

9. Requests for Program Information.

   This table lists the total number of monthly requests for information on selected Medical Center Campus programs.

10. Results of Survey on How Students Knew About Medical Center Campus Programs.

    The results of this survey tabulate data for eight programs concerning how students discover information about Medical Center Campus programs and what directs them toward a health career.

11. Medical Center Campus Program Enrollment in Developmental Courses.

    These tables show enrollments by course and total semester credit hours since August 1981 for the Learning Media Center.

12. Miami-Dade Community College. (November 15, 1982; revised November 4, 1983). Use of curriculum forms. Procedures Manual (Procedure 8150). Miami, FL: Published by the College.

    The procedure provides directions for initiating proposals for new courses and programs or requesting changes to existing courses and programs.

13. Campus Curriculum Committee Members.

    This reference includes listing of the composition of the Campus Curriculum Committee and the names of the personnel currently in each position.

14. Miami-Dade Community College Curriculum Forms.

    This set of documents includes five forms with detailed instructions to initiate new courses or programs or to change existing courses and programs.

15. Specialized Accreditation Agencies of Medical Center Campus Programs.

    This table lists each program offered by Medical Center Campus and the name of the agency which accredited the program.

16. Program Accreditation Self-Studies.

    Copies of the self-studies required by the respective specialized accrediting agencies for each program are on file at the campus.

17. Medical Center Campus Associate In Science Degree and Planned Certificate Curricula.

    Included are the curricula and AGIS (Advisement and Graduation Information System) printouts for thirteen Associate in Science degree and four Planned Certificate programs currently offered by the Medical Center Campus.

18. Student Extracurricular Activities.

This reference lists by date student extracurricular activities occurring on campus since 1977.

19. Medical Center Campus. (1980). Agreement Between District Board of Trustees and Clinical Agency. Miami, FL: Miami-Dade Community College, Medical Center Campus.

This standard eight-page agreement is used with over 60 agencies where students in all programs receive their clinical experiences.

20. Clinical Affiliate Utilization for 1984-85 Academic Year.

This table lists the hospitals, nursing homes, and other health care agencies used for clinical experiences of students and the programs utilizing each agency.

21. Emergency Medical Services Alternate Schedules.

Schedules are presented to illustrate the complex alternate delivery system of Emergency Medical Services courses for students who are full-time emergency care providers.

22. Student Evaluation Procedures and Forms.

Selected examples of the procedures and forms used for student evaluation in Medical Center Campus programs are presented.

23. Baldwin, Anne. (November 1984). Placement and Follow-Up Report: Graduate Survey Responses and State Defined Placements Status of Occupational Programs for the Academic Year 1982-83 (Research Report Number 84-31). Miami, FL: Miami-Dade Community College, Office of Institutional Research.

This annual report tabulates, by program, responses from both graduates and employers as part of a follow-up study required by the state of Florida.

24. Follow-Up Survey Instruments Used By Program Chairpersons.

Selected program follow-up survey instruments used by Medical Center Campus program chairpersons are included.

STANDARD FOUR

1. Summary of Grants and Contracts Received by Medical Center Campus.

This table lists the 70 grants and contracts awarded to Medical Center Campus since 1970.

2. Miami-Dade Community College. (1981-82 through 1984-85). Annual Budgets (4 Vols.). Miami, FL: Published by the College.

These volumes include the budget for the respective years for each of the accounts assigned to Medical Center Campus units.

3. Mean Salaries of Medical Center Campus Personnel.

This table lists various categories of personnel and the number of positions and mean salary of each category for the years 1974 through 1984.

4. Miami-Dade Community College. (1981-82 through 1983-84). Cost Analysis Reports (3 Vols.). Miami, FL: Published by the College.

Each volume contains a series of computer printouts reporting cost analyses as required by the Florida Community College Management Information Systems Procedures Manual.

5. Base Budget Request Form, Fiscal Year 1984-85.

This form is used by each area of the College in preparing the annual budget.

6. Miami-Dade Community College. (1984-85). Chart of Accounts for Fiscal Year 1984-1985. Miami, FL: Published by the College.

This document lists each of the account numbers for each account title for the College.

7. Miami-Dade Community College. (1984-85). *Object Code Classification for Fiscal Year 1984-85*. Miami, FL: Published by the College.

    This listing contains all of the College budget classifications within the following object code series:

    500 Salaries
    600 Current Expenses
    700 Capital Outlay

8. Miami-Dade Community College Departmental Budget (Monthly Statements).

    These documents, prepared for each account number, are monthly statements listing the appropriation, encumberances, expenditures, and free balance for each object code classification.

9. Miami-Dade Community College. (July 30, 1970). Property Control. *Procedures Manual* (Procedure 3900). Miami, FL: Published by the College.

    Miami-Dade Community College. (September 4, 1975). Survey of Plant Property. *Procedures Manual* (Procedure 3970). Miami, FL: Published by the College.

    These two procedures provide a system for accountability of college property and an administrative process for removing college property from property and financial control records.

STANDARD FIVE

1. Miami-Dade Community College. (May 25, 1976). Recruitment and Selection. *Procedures Manual* (Procedure 2100). Miami, FL: Published by the College.

    The procedure outlines action necessary to provide uniformity in the recruitment and selection of new employees.

2. Miami-Dade Community College. (November 8, 1976). New Employees, Employment and Personnel Records. *Procedures Manual* (Procedure 2101). Miami, FL: Published by the College.

    This section provides an outline of the procedure used for processing, establishing and maintaining personnel records for all full-time and part-time personnel.

3. Documents for Application for Employment.

   These documents include the following forms:

   Professional/Administrative Employment Application

   Professional Reference

   Employee's Withholding Allowance Certificate

   Statistical Data Collection Form

4. Miami-Dade Community College. (December 3, 1969; revised April 13, 1977 and November 1, 1983). Governance Constitution of the Faculty Senates. *Policy Manual* (Policy I-80). Miami, FL: Published by the College.

   This document cooperatively establishes participative governance at Miami-Dade Community College between the faculty and administration.

5. Medical Center Campus Faculty Senate. (January 1984). *Faculty Senate, Medical Center Campus, Miami-Dade Community College Bylaws*. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   This copy of the Faculty Senate Bylaws contains 13 articles.

6. Medical Center Campus. (1977-78). *Miami-Dade Community College Faculty Handbook, Medical Center Campus*. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   Medical Center Campus (1979-81). *Faculty Handbook, Miami-Dade Community College Medical Center Campus*. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   These handbooks contain sections on collegewide information and services, governance constitution, support services, and administrative services.

7. Faculty Demographic Statistics.

   These tables contain demographic information on faculty, classified staff, and professional staff as to rank, degrees, number of years employment at Miami-Dade Community College, and age ranges.

8. Miami-Dade Community College. (July 20, 1981). Professional Leaves. *Policy Manual* (Policy II-26). Miami, FL: Published by the College.

The policy explains the types of leaves available such as short-term, professional development, professional (short and extended), and consulting.

9. Faculty Attendance at Workshops, Professional Meetings, and In-Service Training.

   These data, on file for each faculty respondent, list the meeting, dates attended, and sponsoring organization. In addition, leaves of absence for study and/or research are listed.

10. Miami-Dade Community College. (March 24, 1972). Contract and Compensation: Basic Year Contract, College Year Contract, and Administrative Contract. Procedures Manual (Procedure 2140). Miami, FL: Published by the College.

    This procedure lists the four types of contracts, utilization of various contracts, and method of compensation.

11. Miami-Dade Community College. (Latest revision August 28, 1984). Instructional Salary Schedule. Policy Manual (Policy II-52). Miami, FL: Published by the College.

    This policy lists the latest salary schedule for instructional personnel.

12. Florida Community Colleges Instructional Salary Schedules.

    Two tables are included which compare, among other data, the instructional daily rate of pay among the 29 community colleges in Florida.

13. Summary of Faculty Benefits.

    This table summarizes 38 benefits available to Miami-Dade Community College faculty.

14. Miami-Dade Community College. (July 1, 1968). Academic Freedom. Policy Manual (Policy I-14). Miami, FL: Published by the College.

    This is the 1940 Statement of Principles relating to academic freedom developed by the American Association of University Professors in cooperation with the Association of American Colleges which was approved by the faculty senate and adopted by the District

Board of Trustees.

15. Miami-Dade Community College. (July 1, 1968; revised November 23, 1981). Separation, Dismissal or Suspension - Instructional Personnel. Policy Manual (Policy II-16). Miami, FL: Published by the College.

    Miami-Dade Community College. (August 6, 1969). Rules and Procedures for Administrative Hearings for Instructional Staff. Policy Manual (Policy II-78). Miami, FL: Published by the College.

    These are the policies governing the right of an instructional staff member to a public hearing under the State School Code and the procedures to be followed.

16. Miami-Dade Community College. (July 20, 1981; revised May 31, 1983 and June 3, 1983). Defining the Workweek for College Personnel. Policy Manual (Policy II-8). Miami, FL: Published by the College.

    Miami-Dade Community College. (July 20, 1981). Workload for Instructional Personnel. Policy Manual (Policy II-8A). Miami, FL: Published by the College.

    Miami-Dade Community College. (January 9, 1974 and November 23, 1981). Minimum Amount of Service Required for One Year of Service for Instructional Personnel. Policy Manual (Policy II-9). Miami, FL: Published by the College.

    Miami-Dade Community College. (February 8, 1974; revised July 2, 1979). Workload for Instructional Personnel. Procedures Manual (Procedure 2150). Miami, FL: Published by the College.

    These documents define the workweek of all faculty in both contact hours and points. The workweek of administrative, classified, and staff personnel is defined in contact hours.

17. Miami-Dade Community College. (April 15, 1977). Evaluation of Employees. Procedures Manual (Procedure 2352). Miami, FL: Published by the College.

    The procedure describes the evaluation of all full-time employees.

18. College Evaluation Form.

    This form is required to be completed annually for each faculty member.

19. Medical Center Campus Faculty Evaluation Criteria and Forms.

This reference contains the criteria by which faculty are evaluated on the Medical Center Campus and the forms for self-evaluation, student evaluation, peer evaluation, and immediate supervisor evaluation.

20. Miami-Dade Community College. (July 1, 1968 and November 23, 1981). Establishment of Academic Ranks and Classification for Non-Instructional Personnel. Policy Manual (Policy II-40). Miami, FL: Published by the College.

    Miami-Dade Community College. (July 1, 1968 and March 12, 1969; revised January 22, 1971 and December 10, 1981). Academic Rank. Policy Manual (Policy II-41). Miami, FL: Published by the College.

    These two policies establish faculty academic rank and the criteria for placement and promotion thereof.

21. Faculty Assignment Form.

    This form for both full- and part-time faculty is used for task assignments and serves as the document by which all faculty are paid.

22. Community College Council of Presidents, Florida Association of Community Colleges, and State Board of Community Colleges. (1985). A Legislative Program for Florida's Community Colleges 1985. Tallahassee, FL: Florida Association of Community Colleges.

    This document contains Community College recommendations for legislative considerations for 1985-86.

STANDARD SIX

1. Statement of Library Purpose and Goals.

   This statement gives the purpose and five goals of the Medical Center Campus Library.

2. Statement of Audio-visual Area Responsibilities.

   The statement describes the responsibilities of the audio-visual distribution/study center and the television studio/closed circuit area.

3. Classified Staff Position Descriptions for Library.

Detailed job descriptions for the Medical Center Campus Library, as revised in 1983, are given.

4. Miami-Dade Community College. (1982). *Audio-visual Equipment Depreciation Plan*. Miami, FL: Published by the College.

   The report provides a systematized plan for replacement of old and obsolete audio-visual equipment based upon criteria of the Federal Government, Association for the Education of Communication Technology (AECT) and Educational Products Information Exchange (EPIE).

5. Miami-Dade Community College. (July 1, 1968). College Library - Campuses. *Policy Manual* (Policy IX-1). Miami, FL: Published by the College.

   Miami-Dade Community College. (September 15, 1969). Library Service Functions. *Procedures Manual* (Procedure 9100). Miami, FL: Published by the College.

   These two documents establish and organize campus libraries and list functions of campus libraries.

6. Medical Center Campus Library. (1985). [Bibliographies]. Miami, FL: Miami-Dade Community College, Medical Center Campus Library.

   Computer-generated bibliographies are available for eleven program areas based on program codes, for five general subject disciplines based on classification numbers, and for reference materials based on reference location code.

7. Medical Center Campus Library. (1985). [Periodical Holdings, Reports and Print-Outs]. Miami, FL: Miami-Dade Community College, Medical Center Campus Library.

   Computer-generated reports are available showing periodical holdings for Medical Center Campus, subject listings, claims reports, all field listings, periodical titles sorted by subscription status, disposition code, source code, and other data output of the automated system.

8. Miami-Dade Community College Libraries. (1985). [Public Access Terminal Screen Examples]. Miami, FL: Published by the College Libraries.

   Printed copies of the user screens are available on the Public Access Terminals in the libraries showing the Master Menu, HELP screens, and bibliographic access to the College's library holdings.

9. Medical Center Campus Library Services Surveys.

    Instruments, completed surveys, and computer analyses are presented for two surveys administered to students, faculty, and staff in November-December, 1983.

10. Medical Center Campus Library. (1983-84). [Student's Guides to the Library]. Miami, FL: Miami-Dade Community College, Medical Center Campus Library.

    Specialized guides to the library have been developed for six program areas (two more are in progress).

11. Medical Center Campus Audio-visual Area. (1980; revised 1981 and 1984). Audio-visual Faculty Manual. Miami, FL: Miami-Dade Community College, Medical Center Campus Audio-visual Area.

    This manual, distributed to all campus faculty members, contains information of services provided by Media Services, biomedical maintenance area, and TV engineering services. It also gives a listing of all audio-visual materials held on the campus, by accession number, alphabetical listing, and subject heading.

12. Medical Center Campus Library. (1985). [Reserve Listings and Forms]. Miami, FL: Miami-Dade Community College, Medical Center Campus.

    Computer-generated lists of reserve materials are available in the library, sorted by course number and by instructor. Copyright clearance permission forms are included.

13. Library Circulation Statistics.

    The table presents a summary of circulation statistics since academic year 1977-78 on books, reserves, unbound periodicals, and microfiche.

14. Medical Center Campus Library Interlibrary Loan Statistics.

    Completed inter/intralibrary loan forms from 1977 to date are included as well as transaction log sheets from July 1982 to date.

15. Medical Center Campus Library Equipment List.

A listing is available for major items of equipment including microform reader/printers, circulation equipment, CRT terminals, and typewriters.

16. Medical Center Campus Audio-visual Equipment List.

This is an equipment listing by property control (PC) number giving complete history of each property item in the audio-visual cost center.

17. Medical Center Campus Library Utilization Statistics.

Records of library use including gate counts (1977-85), head counts (1982-85), and reference statistics (1977-date) are presented.

18. Southeast Florida Educational Consortium. (June 1981). Agreement on Consortium Libraries Access for Students, Faculty, and Staff of Consortium Member Institutions. Miami, FL: Published by the Consortium.

This agreement includes procedures and rules for access to Consortium libraries.

19. Miami Health Sciences Library Consortium Participating Libraries.

A list of area health science libraries participating in the Miami Health Sciences Library Consortium is given.

STANDARD SEVEN

1. Student and Instructional Support Services Goals.

This document contains goal statements for the Dean of Student and Instructional Support Services; academic services; admission, registration and records; financial aid; library; student activities; arts and sciences; and instructional support services areas.

2. Student and Instructional Support Services Professional Staff.

Curriculum vitae of each member of the professional staff (dean, directors, and chairpersons) are given listing educational background, employment experience, certification held, professional affiliations, publications, papers presented, membership in community organizations, and honors held.

3. Staffing of Student and Instructional Support Services.

   This reference is a listing of personnel and positions held in this area.

4. Miami-Dade Community College. (Revised May 22, 1978). Students Deemed Psychologically Unfit to Attend Miami-Dade Community College. *Procedures Manual* (Procedure 4392). Miami, FL: Published by the College.

   The procedure is described whereby students may be denied admission or dismissed if they have been adjudged psychologically unfit to be enrolled at Miami-Dade Community College.

5. Medical Center Campus. (October 1983). *The Antidote* (Vol. 7, No. 2). Miami, FL: Miami-Dade Community College, Medical Center Campus.

   This issue is oriented toward providing information to new students concerning the campus and services available to them.

6. Medical Center Campus. (March 22, 1984). *Advisement Information, Medical Center Campus*. Miami, FL: Published by the Campus.

   A comprehensive 11-section handbook which is prepared for and distributed to all Medical Center Campus deans, chairpersons, faculty, and staff advisors to assist in advising students.

7. Medical Center Campus Student Organizations.

   This reference lists all active campus organizations and the current officers in each.

8. Medical Center Campus. *The Organization Handbook*. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   This 28-page handbook informs students of policies and procedures which affect student organizations on campus.

9. Medical Center Campus Student Senate Constitution.

A copy of the Student Senate Constitution is offered.

10. Miami-Dade Community College. (Revised July 1984). Student Rights and Responsibilities. Miami, FL: Published by the College.

    This 28-page booklet details students' rights and responsibilities, student code of conduct, disciplinary procedures, release of student information, and mass assemblies and demonstrations, among other topics.

11. Miami-Dade Community College. (July 20, 1977; revised June 25, 1979). Students' Rights and Responsibilities. Policy Manual (Policy IV-5). Miami, FL: Published by the College.

    This 10-page document enumerates the essential provisions for student freedom and for students to understand how they participate responsibly in the College community.

12. Example of Advisement and Graduation Information System (AGIS) Report.

    A copy of a typical, 16-page AGIS report for a student is presented.

13. Medical Center Campus. (January, 1984). Money Matters: A Guide to Financial Aid. Miami, FL: Miami-Dade Community College, Medical Center Campus.

    This booklet assists the student in applying for financial aid at the Medical Center Campus.

14. Schwartz, Margery I. (December 1983). An Analysis of Students' Perceptions of Advisement and Testing Services at Medical Center Campus. Unpublished manuscript. Miami-Dade Community College, Medical Center Campus.

    This report is based on an 18-question survey administered to all students who used the campus advisement services between July and September 1983.

STANDARD EIGHT

1. Medical Center Campus Map.

    This map, covering approximately a ten square block area, shows the location of the Medical Center Campus in relation to 42 other facilities, of which 34 are health-related.

2. Medical Center Campus. (August 1, 1973; revised July 1, 1975). Medical Center Campus Building Specifications. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   This 330-page document gives the educational specifications for the current building as was prepared by the administrative staff and respective specialty faculty.

3. Floor Plans of the Medical Center Campus.

   The floor plans are given for each of the three floors in the current building, showing assigned spaces.

4. Medical Center Campus Selected Space Areas.

   This table gives the square footage of selected areas of the facility.

5. Miami-Dade Community College. (November 17, 1981). Physical Facilities Inventory List. Miami, FL: Published by the College.

   This inventory lists each room, corridor, etc., of the College with the use code, net assignable square feet, and capacity (both actual and design).

6. Hourly Student Population.

   This table lists the campus student population for each hour during a typical week of the 1983-84 Winter Term.

7. Classroom Utilization, 1983-84 Winter Term.

   This table lists the usage of each classroom during a typical week of the 1983-84 Winter Term.

8. Medical Center Campus. General Information and Security Handbook. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   The handbook contains information on building operations, emergency and evacuation instructions, and security and safety procedures.

STANDARD NINE

1. National Commission on Allied Health Education. (1980). The Future of Allied Health Education. San Francisco, CA: Jossey-Bass Publishers.

   This publication is the result of a national study, funded by the Kellogg Foundation, on trends in allied health education.

2. Evaluation Plan of Community Extension Offerings and Program.

   This document is an example of an evaluation plan which includes the criteria for conducting an evaluation.

3. Medical Center Campus. (Winter, Spring-Summer-1985). Community Extension - Nursing. Miami, FL: Miami-Dade Community College, Medical Center Campus.

   This is a sample of the booklet prepared twice a year listing all course offerings and descriptions and the time and place of offering of each Nursing Education Community Extension course.

4. Cuban Nurse Program.

   This is a set of the complete syllabi of all courses offered in the special Cuban nurse program.

5. Professional Registered Nurse Opportunities (PRO) Course Descriptions.

   Course descriptions of the seven courses offered in the PRO program are given.

ALLIANCE FOR EMPLOYEE ADVANCEMENT SYSTEM

1. District Board of Trustees. (September 28, 1981). Report of Alliance for Employee Advancement. District Board of Trustees Agenda Book (Agenda Item Number IX-2, pp. 270-271). Miami, FL; Miami-Dade Community College.

   This item is a status report of the Alliance for Employee Advancement System which includes the history and planned activities.

2. Alliance Questionnaire, Including results, for Executive Directors of Health Care Agencies.

   This is an eight-question survey, with results indicated in terms of percentages, distributed to 15 exe-directors of health care agencies with a 60% return.

3. The Alliance Questionnaire, Including Results, for Education Directors of Health Care Agencies.

   This is a 21-question survey, with results indicated in terms of percentages, distributed to 17 education directors of health care agencies with a 53% return.

4. Alliance Questionnaire, Including Results, For Students.

   This is a 36-question survey, with results indicated in terms of percentages, distributed to 220 Alliance System students with a 94% return.

5. Alliance Questionnaire, Including Results, for College Alliance System Faculty.

   This is an 15-question survey, with results indicated in terms of percentage, distributed to 16 College Alliance System faculty with a 100% return.

6. Alliance Questionnaire, Including Results, for Medical Center Campus Staff.

   This is a 15-question survey, with results indicated in terms of percentages, distributed to four Medical Center Campus staff with a 100% return.

1984 SELF-STUDY

VOLUME 1 SUMMARY AND RECOMMENDATIONS
VOLUME 2 PRESCRIPTIVE EDUCATION
VOLUME 3 ACADEMIC POLICIES AND CURRICULUM REFORMS
VOLUME 4 STUDENT INFORMATION AND PREFORMANCE STANDARDS
VOLUME 5 NORTH CAMPUS STUDIES
VOLUME 6 SOUTH CAMPUS STUDIES
VOLUME 7 MITCHELL WOLFSON CAMPUS STUDY
VOLUME 8 MEDICAL CENTER CAMPUS STUDIES

[redacted]

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ERIC CLEARINGHOUSE FOR
JUNIOR COLLEGES

AUGUST 30, 1985